

ALTERNATIVE MEDICINE

A MEDICAL DICTIONARY, BIBLIOGRAPHY,
AND ANNOTATED RESEARCH GUIDE TO
INTERNET REFERENCES



JAMES N. PARKER, M.D.
AND PHILIP M. PARKER, PH.D., EDITORS

ICON Health Publications
ICON Group International, Inc.
4370 La Jolla Village Drive, 4th Floor
San Diego, CA 92122 USA

Copyright ©2003 by ICON Group International, Inc.

Copyright ©2003 by ICON Group International, Inc. All rights reserved. This book is protected by copyright. No part of it may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without written permission from the publisher.

Printed in the United States of America.

Last digit indicates print number: 10 9 8 7 6 4 5 3 2 1

Publisher, Health Care: Philip Parker, Ph.D.
Editor(s): James Parker, M.D., Philip Parker, Ph.D.

Publisher's note: The ideas, procedures, and suggestions contained in this book are not intended for the diagnosis or treatment of a health problem. As new medical or scientific information becomes available from academic and clinical research, recommended treatments and drug therapies may undergo changes. The authors, editors, and publisher have attempted to make the information in this book up to date and accurate in accord with accepted standards at the time of publication. The authors, editors, and publisher are not responsible for errors or omissions or for consequences from application of the book, and make no warranty, expressed or implied, in regard to the contents of this book. Any practice described in this book should be applied by the reader in accordance with professional standards of care used in regard to the unique circumstances that may apply in each situation. The reader is advised to always check product information (package inserts) for changes and new information regarding dosage and contraindications before prescribing any drug or pharmacological product. Caution is especially urged when using new or infrequently ordered drugs, herbal remedies, vitamins and supplements, alternative therapies, complementary therapies and medicines, and integrative medical treatments.

Cataloging-in-Publication Data

Parker, James N., 1961-
Parker, Philip M., 1960-

Alternative Medicine: A Medical Dictionary, Bibliography, and Annotated Research Guide to Internet References /
James N. Parker and Philip M. Parker, editors

p. cm.

Includes bibliographical references, glossary, and index.

ISBN: 0-597-83556-X

1. Alternative Medicine-Popular works. I. Title.

Disclaimer

This publication is not intended to be used for the diagnosis or treatment of a health problem. It is sold with the understanding that the publisher, editors, and authors are not engaging in the rendering of medical, psychological, financial, legal, or other professional services.

References to any entity, product, service, or source of information that may be contained in this publication should not be considered an endorsement, either direct or implied, by the publisher, editors, or authors. ICON Group International, Inc., the editors, and the authors are not responsible for the content of any Web pages or publications referenced in this publication.

Copyright Notice

If a physician wishes to copy limited passages from this book for patient use, this right is automatically granted without written permission from ICON Group International, Inc. (ICON Group). However, all of ICON Group publications have copyrights. With exception to the above, copying our publications in whole or in part, for whatever reason, is a violation of copyright laws and can lead to penalties and fines. Should you want to copy tables, graphs, or other materials, please contact us to request permission (E-mail: iconedit@san.rr.com). ICON Group often grants permission for very limited reproduction of our publications for internal use, press releases, and academic research. Such reproduction requires confirmed permission from ICON Group International Inc. **The disclaimer above must accompany all reproductions, in whole or in part, of this book.**

Acknowledgements

The collective knowledge generated from academic and applied research summarized in various references has been critical in the creation of this book which is best viewed as a comprehensive compilation and collection of information prepared by various official agencies which produce publications on alternative medicine. Books in this series draw from various agencies and institutions associated with the United States Department of Health and Human Services, and in particular, the Office of the Secretary of Health and Human Services (OS), the Administration for Children and Families (ACF), the Administration on Aging (AOA), the Agency for Healthcare Research and Quality (AHRQ), the Agency for Toxic Substances and Disease Registry (ATSDR), the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), the Healthcare Financing Administration (HCFA), the Health Resources and Services Administration (HRSA), the Indian Health Service (IHS), the institutions of the National Institutes of Health (NIH), the Program Support Center (PSC), and the Substance Abuse and Mental Health Services Administration (SAMHSA). In addition to these sources, information gathered from the National Library of Medicine, the United States Patent Office, the European Union, and their related organizations has been invaluable in the creation of this book. Some of the work represented was financially supported by the Research and Development Committee at INSEAD. This support is gratefully acknowledged. Finally, special thanks are owed to Tiffany Freeman for her excellent editorial support.

About the Editors

James N. Parker, M.D.

Dr. James N. Parker received his Bachelor of Science degree in Psychobiology from the University of California, Riverside and his M.D. from the University of California, San Diego. In addition to authoring numerous research publications, he has lectured at various academic institutions. Dr. Parker is the medical editor for health books by ICON Health Publications.

Philip M. Parker, Ph.D.

Philip M. Parker is the Eli Lilly Chair Professor of Innovation, Business and Society at INSEAD (Fontainebleau, France and Singapore). Dr. Parker has also been Professor at the University of California, San Diego and has taught courses at Harvard University, the Hong Kong University of Science and Technology, the Massachusetts Institute of Technology, Stanford University, and UCLA. Dr. Parker is the associate editor for ICON Health Publications.

About ICON Health Publications

To discover more about ICON Health Publications, simply check with your preferred online booksellers, including Barnes & Noble.com and Amazon.com which currently carry all of our titles. Or, feel free to contact us directly for bulk purchases or institutional discounts:

ICON Group International, Inc.
4370 La Jolla Village Drive, Fourth Floor
San Diego, CA 92122 USA
Fax: 858-546-4341
Web site: www.icongrouponline.com/health

Table of Contents

FORWARD.....	1
CHAPTER 1. STUDIES ON ALTERNATIVE MEDICINE.....	3
<i>Overview</i>	3
<i>The Combined Health Information Database</i>	3
<i>Federally Funded Research on Alternative Medicine</i>	14
<i>E-Journals: PubMed Central</i>	22
<i>The National Library of Medicine: PubMed</i>	24
CHAPTER 2. NUTRITION AND ALTERNATIVE MEDICINE.....	39
<i>Overview</i>	39
<i>Finding Nutrition Studies on Alternative Medicine</i>	39
<i>Federal Resources on Nutrition</i>	48
<i>Additional Web Resources</i>	48
CHAPTER 3. ALTERNATIVE MEDICINE AND ALTERNATIVE MEDICINE.....	51
<i>Overview</i>	51
<i>The Combined Health Information Database</i>	51
<i>National Center for Complementary and Alternative Medicine</i>	57
<i>Additional Web Resources</i>	64
<i>General References</i>	97
CHAPTER 4. DISSERTATIONS ON ALTERNATIVE MEDICINE.....	99
<i>Overview</i>	99
<i>Dissertations on Alternative Medicine</i>	99
<i>Keeping Current</i>	101
CHAPTER 5. CLINICAL TRIALS AND ALTERNATIVE MEDICINE	103
<i>Overview</i>	103
<i>Recent Trials on Alternative Medicine</i>	103
<i>Keeping Current on Clinical Trials</i>	124
CHAPTER 6. PATENTS ON ALTERNATIVE MEDICINE	127
<i>Overview</i>	127
<i>Patents on Alternative Medicine</i>	127
<i>Patent Applications on Alternative Medicine</i>	128
<i>Keeping Current</i>	132
CHAPTER 7. BOOKS ON ALTERNATIVE MEDICINE	135
<i>Overview</i>	135
<i>Book Summaries: Federal Agencies</i>	135
<i>Book Summaries: Online Booksellers</i>	137
<i>The National Library of Medicine Book Index</i>	139
<i>Chapters on Alternative Medicine</i>	142
<i>Directories</i>	142
CHAPTER 8. MULTIMEDIA ON ALTERNATIVE MEDICINE	145
<i>Overview</i>	145
<i>Audio Recordings</i>	145
<i>Bibliography: Multimedia on Alternative Medicine</i>	145
CHAPTER 9. PERIODICALS AND NEWS ON ALTERNATIVE MEDICINE	149
<i>Overview</i>	149
<i>News Services and Press Releases</i>	149
<i>Newsletters on Alternative Medicine</i>	155
<i>Newsletter Articles</i>	155
<i>Academic Periodicals covering Alternative Medicine</i>	157
APPENDIX A. PHYSICIAN RESOURCES.....	161
<i>Overview</i>	161
<i>NIH Guidelines</i>	161

<i>NIH Databases</i>	163
<i>Other Commercial Databases</i>	167
APPENDIX B. PATIENT RESOURCES	169
<i>Overview</i>	169
<i>Patient Guideline Sources</i>	169
<i>Finding Associations</i>	185
APPENDIX C. FINDING MEDICAL LIBRARIES	187
<i>Overview</i>	187
<i>Preparation</i>	187
<i>Finding a Local Medical Library</i>	187
<i>Medical Libraries in the U.S. and Canada</i>	187
ONLINE GLOSSARIES	193
<i>Online Dictionary Directories</i>	194
ALTERNATIVE MEDICINE DICTIONARY	195
INDEX	237

FORWARD

In March 2001, the National Institutes of Health issued the following warning: "The number of Web sites offering health-related resources grows every day. Many sites provide valuable information, while others may have information that is unreliable or misleading."¹ Furthermore, because of the rapid increase in Internet-based information, many hours can be wasted searching, selecting, and printing. Since only the smallest fraction of information dealing with alternative medicine is indexed in search engines, such as **www.google.com** or others, a non-systematic approach to Internet research can be not only time consuming, but also incomplete. This book was created for medical professionals, students, and members of the general public who want to know as much as possible about alternative medicine, using the most advanced research tools available and spending the least amount of time doing so.

In addition to offering a structured and comprehensive bibliography, the pages that follow will tell you where and how to find reliable information covering virtually all topics related to alternative medicine, from the essentials to the most advanced areas of research. Public, academic, government, and peer-reviewed research studies are emphasized. Various abstracts are reproduced to give you some of the latest official information available to date on alternative medicine. Abundant guidance is given on how to obtain free-of-charge primary research results via the Internet. **While this book focuses on the field of medicine, when some sources provide access to non-medical information relating to alternative medicine, these are noted in the text.**

E-book and electronic versions of this book are fully interactive with each of the Internet sites mentioned (clicking on a hyperlink automatically opens your browser to the site indicated). If you are using the hard copy version of this book, you can access a cited Web site by typing the provided Web address directly into your Internet browser. You may find it useful to refer to synonyms or related terms when accessing these Internet databases. **NOTE:** At the time of publication, the Web addresses were functional. However, some links may fail due to URL address changes, which is a common occurrence on the Internet.

For readers unfamiliar with the Internet, detailed instructions are offered on how to access electronic resources. For readers unfamiliar with medical terminology, a comprehensive glossary is provided. For readers without access to Internet resources, a directory of medical libraries, that have or can locate references cited here, is given. We hope these resources will prove useful to the widest possible audience seeking information on alternative medicine.

The Editors

¹ From the NIH, National Cancer Institute (NCI): <http://www.cancer.gov/cancerinfo/ten-things-to-know>.

CHAPTER 1. STUDIES ON ALTERNATIVE MEDICINE

Overview

In this chapter, we will show you how to locate peer-reviewed references and studies on alternative medicine.

The Combined Health Information Database

The Combined Health Information Database summarizes studies across numerous federal agencies. To limit your investigation to research studies and alternative medicine, you will need to use the advanced search options. First, go to <http://chid.nih.gov/index.html>. From there, select the "Detailed Search" option (or go directly to that page with the following hyperlink: <http://chid.nih.gov/detail/detail.html>). The trick in extracting studies is found in the drop boxes at the bottom of the search page where "You may refine your search by." Select the dates and language you prefer, and the format option "Journal Article." At the top of the search form, select the number of records you would like to see (we recommend 100) and check the box to display "whole records." We recommend that you type "alternative medicine" (or synonyms) into the "For these words:" box. Consider using the option "anywhere in record" to make your search as broad as possible. If you want to limit the search to only a particular field, such as the title of the journal, then select this option in the "Search in these fields" drop box. The following is what you can expect from this type of search:

- **The Use of Alternative Medicine in the Treatment of HIV Infection and AIDS**

Source: BETA: Bulletin of Experimental Treatments for AIDS; June 1994.

Contact: Impact AIDS, 1069 Dutton Ave, Santa Rosa, CA, 95407, (707) 542-6297,
<http://www.journeyhome.com/impactaids>.

Summary: The history and current research on alternative herbal and holistic HIV therapies are reviewed in this article. Alternative therapies, recognized in 1992 with the advent of the Office of Alternative Medicine, may complement allopathic medicine. Clinical trials are lacking, but are vital to determine dosage and toxicity, and for quality control so that people's health and finances are not at risk. Herbal therapies examined include Acemannan, Bitter melon, and Curcumin. Guidelines for using alternative

treatments are listed, such as researching the product, being wary of secret formulas, and using common sense. Holism and indigenous medicines are discussed as ways to restore balance to the body so the body may heal itself. These include African herbal medicines, Ayurvedic holistic medicine, and traditional Chinese medicine, which seeks balance between changing variables through acupuncture and herbal formulas.

- **Alternative Medicine: Unproven Treatment Gain Followers, Draw Warnings of Quackery**

Source: *The CQ Researcher*; Vol. 2, No. 4.

Contact: Congressional Quarterly, Incorporated, 1414 22nd St NW, Washington, DC, 20037.

Summary: This report explores the growing influence of medical treatments that have not been approved by mainstream authorities. As evidence of this trend, the author points to the recently created Office of Alternative Medicine of the National Institutes of Health, and the increasing number of adherents to homeopathy, acupuncture, chiropractic, and various other traditional and new treatments. He cites dissatisfaction with conventional medicine, perceived as too impersonal and technocratic by many patients, among the reasons they are turning to alternative therapies, especially for serious illnesses which conventional medicine cannot cure. One article focuses on AIDS as a particularly fertile source of alternative treatments. It discusses the emergence of "buyers clubs" for underground AIDS remedies, lists therapies condemned by the Food and Drug Administration, and indicates sources of information on unproven remedies and holistic approaches. The report explores the background of alternative therapies, highlighting the "mind-body connection", "fringe" technologies, cancer "cures" and treatments, and the mainstream acceptance of the chiropractic profession. Discussed in an analysis of the current situation are an insurance company that offers coverage for alternative treatments and State regulations on practitioners of alternative medicine. A related article presents viewpoints on the potential for a coexistence between alternative and conventional medicine. Also included are a chronology of alternative medicine in the United States since 1800, a glossary of treatments, a brief review of faith healing, and a bibliography and list of resources.

- **Complementary and Alternative Medicines for Alzheimer's Disease**

Source: *Journal of Geriatric Psychology and Neurology*. 11: 163-173. 1998.

Summary: This journal article reviews some of the more common complementary and alternative medicine (CAM) therapies for dementia that a physician may encounter. It is organized into the following sections: dietary factors, including alcohol intake; vitamins, including thiamine (vitamin B1), cobalamin (vitamin B12), ascorbic acid (vitamin C), beta-carotene, and alpha-tocopherol (vitamin E); other metabolic agents, including acetyl-L-carnitine, choline and lecithin, dimethylaminoethanol, phosphatidylserine, and coenzyme Q10; herbs, including ginkgo biloba, and ginseng; and hormones, including pregnenolone, dehydroepiandrosterone, and melatonin. The authors caution that these CAM therapies are considered unproven treatments, and there are insufficient data about safety and efficacy upon which to make specific recommendations. 2 tables, 117 references.

- **Hope Helps: Placebos and Alternative Medicine in Rheumatology**

Source: *Rheumatic Disease Clinics of North America*. 25(4): 855-860. November 1999.

Summary: This journal article provides health professionals with information on the use of placebos and alternative remedies in the treatment of rheumatologic conditions. The article contends that placebos help illness, which is defined as the complaints and suffering that often accompany disease, but do not cure disease. The article reviews the use of placebos since the 1940s, focusing on the factors contributing to the derogation of placebos by the 1960s. These factors include the actions of the Food and Drug Administration, medical ethics, and the burgeoning of technology. During the past 10 years, however, placebos have regained some respectability as a result of the acceptance of holistic, or alternative and complementary, medicine. Placebos seem to benefit patients by their effect on the mind-brain apparatus. Placebos may work in part by psychological mechanisms dependent on the patient's faith, which, in turn, is dependent on expectation and hope. In their communications, physicians should include more efforts aimed at reassuring their rheumatology patients. If physicians disdain placebos or alternative medical practices, they forgo the real help provided by ritual, reassurance, and suggestion. 3 references.

- **White House Commission on Complementary and Alternative Medicine Policy: Meeting on the Access to, and Delivery of, Complementary and Alternative Medicine Services (editorial)**

Source: Journal of Alternative and Complementary Medicine. 7(1): 109-110. February 2001.

Summary: This journal article summarizes proceedings from the meeting on Access and Delivery of Complementary and Alternative Medicine (CAM) Services, held December 4-5, 2000, by the White House Commission on CAM Policy. During the 2-day meeting, expert witnesses made written and verbal presentations and preregistered members of the public had an opportunity to comment. According to this author, some familiar disputes and long-standing tensions were aired, but the mood was positive. Therapists expressed the view that physicians are dominating the movement to integrate. However, some physicians were sensitive to the CAM therapists' concerns and eager to work with them on an assumption of parity. Public testimonials emphasized consumers' desire for choice, clear and impartial information, access to research results, and a role in health care decision making. Health insurance and managed care organizations, aware of public pressure, presented examples of coverage schemes to study as prototypes for future policy directions. accessibility, affordability, and accountability issues also were discussed.

- **Can Doctors Respond to Patients' Increasing Interest in Complementary and Alternative Medicine?**

Source: British Medical Journal. 322(7279): 154-158. January 20, 2001.

Summary: This journal article explores how well British doctors are prepared to respond to patients' growing interest in complementary and alternative medicine (CAM). According to the authors, if doctors are to have a role in advising patients about CAM they need to become better informed about its potential benefits and limitations. Doctors are starting to receive more training in CAM at both the undergraduate and postgraduate levels. Such training will enable physicians to integrate different approaches into their practices, and it offers a framework for developing additional skills. These approaches can enhance patient care and meet doctors' needs to balance the technological base of conventional medicine with a softer approach to clinical care. In the authors' opinion, the integration of CAM into medical practice provides the

opportunity to merge the strengths and balance the weaknesses inherent in the two systems of health care. The article has 23 references.

- **Advising Patients on the Use of Complementary and Alternative Medicine**

Source: *Applied Psychophysiological Biofeedback*. 26(3): 205-214. September 2001.

Summary: This article presents a broad survey of what complementary and alternative medicine (CAM) is from the perspectives of both the public as user and the conventional medical practitioner. It also provides examples of issues pertinent to understanding and evaluating research in CAM. It reviews the continuing challenge of how to address CAM services that are based on time, practitioner-patient interactions, and self-care, using modern standards of evidence, education, licensing, and reimbursement.

- **Suggested Curriculum Guidelines on Complementary and Alternative Medicine: Recommendations of the Family Society of Teachers of Medicine Group on Alternative Medicine**

Source: *Family Medicine*. 31(10): 30-33. January 2000.

Summary: This journal article presents the suggested curriculum guidelines on complementary and alternative medicine (CAM) developed by the Society of Teachers of Family Medicine (STFM) Group on Alternative Medicine. The guidelines are designed to assist medical education programs that want to include formal training in CAM in their family practice residencies. They are meant to provide an overview of the key elements to be covered in a curriculum, rather than establishing specific training requirements. They indicate the knowledge, skills, and attitudes that graduating students should acquire to be able to function as unbiased advocates and advisors to patients about CAM. The STFM recommends that all family practice residencies begin to introduce teaching on CAM at some level in their curriculum, depending on the skills and interest of the faculty and the demand for CAM in the residency's patient population. The article has 14 references.

- **Current Status of Cancer Patients' Perception of Alternative Medicine in Japan: A Preliminary Cross-Sectional Survey**

Source: *Support Care Cancer*. 8(1): 28-32. January 2000.

Summary: This journal article presents a survey of cancer patients' perceptions of alternative medicine in Japan. A total of 192 cancer patients at the National Shikoku Cancer Center completed a questionnaire on January 13-14, 1999. Sixty-two patients (32 percent) were users of alternative unproven therapies, and 115 patients (60 patients) had never used such therapies. Users were significantly younger than never-users (average age 56.1 versus 62.5 years), and were significantly more likely to have a college education. When users were asked what they wanted to achieve with alternative medicine, the most common responses were something better than current treatment, suppression of cancer progression, and cure. When asked if the alternative treatment worked as well as expected, 12 patients said yes, 1 said no, 46 gave neither response, and 3 did not answer. Eleven users said they would strongly recommend the therapy to other patients, 13 patients said they would not, and 32 gave neither reply. Eleven users said their doctors were not interested in talking about alternative medicine, and 32 users did not talk to their doctors about such topics. The article has 3 figures, 2 tables, and 5 references.

- **Psychosocial Aspects of Complementary and Alternative Medicine**

Source: *Pharmacotherapy*. 20(11): 1289-1294. November 11, 2000.

Summary: This journal article reviews patterns of complementary and alternative medicine (CAM) use in the United States. Between 1990 and 1997, the proportion of consumers using CAM increased from 33.8 percent to 42.1 percent. Among users, 46.3 percent saw a CAM practitioner and 53.7 percent used CAM on their own. CAM users tend to have high incomes and high levels of education. They are likely to have medical conditions such as chronic pain, poor mental health, human immunodeficiency virus infection, and cancer that are not easily treated by conventional medicine. Many of the most commonly used therapies are noninvasive, but dietary supplements also have become popular. Some therapies such as lifestyle modification, behavior modification, and relaxation techniques are routine parts of treatment plans. Others, such as acupuncture, chiropractic, and massage, are gaining acceptance from the medical community. Only 38.5 percent of CAM users reported this use to their physicians, often because they anticipated disinterest or disapproval from the doctor. More recent data suggest that physicians are more open to discussing CAM than patients perceive. With growing evidence of potential herb-drug interactions, the authors suggest that discussing CAM with patients is becoming even more important. The article has 2 figures and 24 references.

- **Complementary and Alternative Medicine: The Public Wants More**

Source: *Case Manager*. 11(1): 22-24. January/February 2000.

Summary: This article discusses complementary and alternative medicine (CAM), including what CAM is, types of CAM therapies, CAM clients, paying for CAM therapies, and research in CAM. It also provides the Web site addresses for two on-line CAM resources. 5 references.

- **Prevalance of Use of Complementary/Alternative Medicine: A Systematic Review**

Source: *Bulletin of the World Health Organization*. 78(2): 252-257. 2000.

Contact: Available from World Health Organization Headquarters. Avenue Appia 20, 1211 Geneva 27, Switzerland. Telephone: (+00 41 22) 791 21 11; Fax: (+00 41 22) 791 3111; E-mail: publications@who.int. PRICE: Free.

Summary: This article reports the results of a systematic review of the prevalence of use of complementary and alternative medicine (CAM). It summarizes the available data of CAM use among random or representative samples of the population. The article provides a table with information about the selected surveys. 26 references.

- **Order of Things: Alternative Medicine**

Source: *Journal of Allied Health*. 28(1): 36-39. Spring 1999.

Summary: This journal article highlights developments in alternative medicine leading to a reordering of the health care landscape in the United States. The Federal Government has played a role in these changes with the creation in 1992 of the Office of Alternative Medicine within the National Institutes of Health, and its subsequent elevation in 1998 to the National Center for Complementary and Alternative Medicine. The increased interest in alternative care also is reflected in the professional literature. One prominent event was the 1993 publication of a study by D. M. Eisenberg and colleagues reporting a frequency of use and spending patterns much higher than

previously known. In addition, the entire November 11, 1998, issue of the 'Journal of the American Medical Association' was devoted to complementary and alternative medicine. Other authors have reported on the reasons why people use alternative medicine, coverage of alternative medicine in U.S. medical schools, growth in the number of non-physician clinicians, and the personal use of alternative therapies by mainstream health care professionals. Despite these trends, however, the author notes that patients frequently do not discuss their use of alternative therapies with their physicians, indicating a need for improved communication between providers and recipients of care. The article has 12 references.

- **Alternative Medicines Gain in Popularity, Merit Closer Scrutiny**

Source: Journal of the National Cancer Institute. 91(13): 1104-1105. July 7, 1999.

Summary: This journal article discusses current research into complementary and alternative medicine (CAM) therapies for cancer. The National Center for Complementary and Alternative Medicine (NCCAM), established as the Office of Alternative Medicine in 1991, gained its status as a center in the fall of 1998. NCCAM supports 13 clinical research centers to examine the efficacy, safety, and validity of CAM therapies, and to support basic, preclinical, clinical, and epidemiological studies of these therapies. The National Cancer Institute (NCI) recently formed the Office of Cancer Complementary and Alternative Medicine, which works directly with NCCAM. The NCI office will help support studies of interest to cancer research. The University of Texas Center for Alternative Medicine Research (UT-CAM) is the NCCAM-supported center specializing in alternative therapies and prevention for cancer. UT-CAM is studying such therapies as melatonin, mistletoe, the herbal extract Flor-Essence, and 714-X. Other natural therapies being studied include green tea, ginseng, oleander, Chinese herbal medicines, and dietary approaches.

- **Decoding the Mystery: Evaluating Complementary and Alternative Medicine**

Source: Rehab Management. 12(2): 42-45. February-March 1999.

Summary: This journal article discusses the implications of the growing interest in complementary and alternative medicine (CAM) for conventional health care. In the author's opinion, the main challenges are choosing which CAM disciplines to work with, and integrating CAM services into the mainstream practice or delivery system. He suggests that credentialing may be the key to managing these challenges, and recommends looking at the basic credentialing elements such as education, licensure, and malpractice insurance. He also recommends evaluating evidence of efficacy, but notes that the quality of the evidence varies greatly across CAM disciplines. He concludes that the inclusion of effective CAM services is the future of health care, and that this process will be facilitated by further research and experience with CAM. The article has 3 references.

- **Complementary/Alternative Medicine for Health Care Managers: A Course Design**

Source: Journal of Health Administration Education. 17(1): 51-57. Winter 1999.

Summary: This journal article describes a graduate course in complementary and alternative medicine (CAM) that was added to the curriculum of a health services management program. The first section looks at some of the reasons for the increasing interest in CAM. The second section focuses on the concerns that traditional health care managers have about CAM. The third section describes the content of the course in CAM. The course starts with familiar material, including CAM definitions and history,

and the alternative views of health and health care held by authors with traditional medical backgrounds. It then addresses the therapies in their cultural contexts, followed by sessions on individual CAM modalities and their business applications. The article concludes with a discussion of the impact of the course on CAM and the implications for health management programs. The article includes a reference/reading list with 17 items.

- **AMA Report of the Council on Scientific Affairs on Alternative Medicine**

Source: Townsend Letter for Doctors and Patients. Number 178: 135-145. January 1998.

Summary: This journal article reports on the American Medical Association (AMA) Report of the Council on Scientific Affairs on Alternative Medicine. Several alternative systems and techniques are defined, including mind/body interventions, diet and nutrition, herbal remedies, osteopathy, chiropractic, energy healing, pharmacologic methods, acupuncture, homeopathy, naturopathy, Ayurveda, and folk therapies. The Office of Alternative Medicine and the context of the public's use of alternative medicine are discussed. The Council on Scientific Affairs makes several recommendations for dealing with alternative medicine, including (1) promoting well-designed, stringently controlled research studies to determine the efficacy of alternative therapies, (2) urging physicians to inquire routinely about their patients' use of alternative medicine and to educate themselves and their patients on the state of scientific knowledge on alternative therapy, and (3) urging medical schools to offer courses on alternative medicine that will present scientific views of unconventional theories, treatments, and practice as well as the potential therapeutic utility, safety, and efficacy of these modalities. Finally, the Council recommends that patients choosing alternative therapies should be educated as to the hazards that might result from postponing or stopping conventional medical treatments. This journal article contains 39 references.

- **Physicians' Ethical Obligations Regarding Alternative Medicine**

Source: JAMA. Journal of the American Medical Association. 280(18): 1623-1625. November 11, 1998.

Summary: This journal article discusses doctors' ethical obligations regarding alternative medicine. First, the authors explore some of the values and goals shared by alternative and conventional medicine, and some of the ways in which they differ. Then, they discuss ethical principles that define the doctor's professional obligations regarding alternative medicine. They suggest that the spectrum of possible responses to alternative medicine is broad, ranging from an obligation to stifle harmful practices to mere acceptance of nonharmful modalities, to encouraging the use of beneficial interventions. The appropriate set of obligations in a particular case is shaped by the patient, the illness, and the alternative modality under consideration. These obligations are refined and justified by four ethical principles of the medical profession: respect for persons, nonmaleficence, beneficence, and justice. The authors explore how these principles can help guide the doctor in making an appropriate response to alternative medicine. The article has 24 references.

- **Why Patients Use Alternative Medicine: Results of a National Study**

Source: JAMA. Journal of the American Medical Association. 279(19): 1548-1553. May 20, 1998.

Summary: This journal article describes a national study of the reasons why patients use alternative medicine. The researchers focused on three theories: (1) patients are

dissatisfied in some way with conventional medicine; (2) they believe alternative treatments offer more personal autonomy and control over health care decisions; and (3) they consider alternative therapies to be more compatible with their values, worldview, or beliefs about the nature and meaning of health and illness. Demographic variables and health status also were examined as possible predictors of alternative medicine use. A total of 1,035 individuals randomly selected from a national panel who had agreed to participate in mail surveys completed a written survey. The use of alternative health care was associated with more education, poorer health status, a holistic orientation to health, having had a transformational experience that changed the person's worldview, and classification in a cultural group identifiable by a commitment to environmentalism, commitment to feminism, and interest in spirituality and personal growth psychology. Alternative medicine use also was predicted by the presence of anxiety, back problems, chronic pain, and/or urinary tract problems. Dissatisfaction with conventional medicine did not predict use of alternative medicine. Only 4.4 percent of respondents reported relying primarily on alternative therapies. The article has 5 tables and 34 references.

- **Acupuncture : Acupuncture and Traditional Oriental Medicine in the Treatment of HIV and AIDS**

Source: STEP Perspective: Volume 8, No. 1: Spring, 1996.

Contact: Project Inform, HIV Treatment Hotline, 205 13th St Ste 2001, San Francisco, CA, 94103, (415) 558-8669, <http://www.projectinform.org>.

Summary: This reprint explains how acupuncture and other traditional oriental medicines can be used in conjunction with Western treatments for persons with the human immunodeficiency virus (HIV)/acquired immune deficiency syndrome (AIDS). The reprint describes oriental therapies such as acupuncture and moxibustion and how they affect the body in theory, as well as how they complement Western treatments for HIV/AIDS. The reprint also outlines the danger of the transmission of HIV/AIDS through needle sharing.

- **Evidence for Acupuncture As a Treatment for Rheumatologic Conditions**

Source: Rheumatic Disease Clinics of North America. 26(1): 103-115. February 2000.

Summary: This journal article provides health professionals with an overview of the use of acupuncture in treating rheumatologic conditions and an examination of the available evidence to date supporting the use of acupuncture for specific rheumatologic conditions. The general theory of acupuncture, which originated in China more than 2,000 years ago, is based on the premise that there are patterns of energy flow through the body that are essential for health. Acupuncture is believed to correct imbalances in the flow of this energy, or qi, through 12 primary channels, or meridians, and 8 ordinary meridians. Although puncturing the skin with a long thin needle is the usual method of acupuncture, practitioners may also use heat, pressure, friction, suction, or electric stimulation by way of acupuncture needles as an enhancement or replacement. Numerous controlled trials have been conducted during the past several decades suggesting that acupuncture is effective for the treatment of the pain associated with osteoarthritis (OA). There are fewer studies for fibromyalgia than there are for OA, but among the studies that do exist, the benefits of acupuncture are highly consistent. Thus, although large scale clinical trials have yet to be conducted, there is moderately strong evidence that acupuncture may be effective for treating both OA and fibromyalgia. Several studies have also reported that acupuncture is effective in treating rheumatoid arthritis (RA). However, the utility of acupuncture in treating RA has not been

demonstrated in large, randomized controlled trials. Physicians who treat patients with rheumatic conditions should be willing to discuss the potential benefits of using acupuncture for pain relief with their patients. However, patients should also be warned that acupuncture can be harmful and that it is contraindicated for some patients. 2 tables and 54 references. (AA-M).

- **Is Acupuncture Effective in the Treatment of Fibromyalgia?**

Source: *Journal of Family Practice*, The. 48(3): 213-218. March 1999.

Summary: This journal article provides health professionals with information on a study that assessed the effectiveness of acupuncture in the treatment of fibromyalgia syndrome (FMS), identified any adverse effects, and generated hypotheses for future investigation. Researchers searched MEDLINE, EMBASE, Manual Therapy Information System, the Cochrane registry, the University of Maryland Complementary and Alternative Medicine in Pain, the Centralized Information Service for Complementary Medicine, and the National Institutes of Health Office of Alternative Medicine databases for the key words 'acupuncture' and 'fibromyalgia.' Conference abstracts, citation lists, and letters supplemented the search. Selected for study inclusion were all randomized or quasi randomized controlled trials or cohort studies of patients with FMS who were treated with acupuncture. Methodologic quality, sample characteristics, type of acupuncture treatment, and outcomes were extracted. Three randomized controlled trials and four cohort studies were included. Only one was of high methodologic quality. The high quality study suggests that real acupuncture is more effective than sham acupuncture for relieving pain, increasing pain thresholds, improving global ratings, and reducing morning stiffness of FMS, but the duration of benefit following the acupuncture treatment series is not known. Some patients report no benefit, and a few report an exacerbation of FMS-related pain. Lower quality studies were consistent with these findings. Booster doses of acupuncture to maintain benefit once regular treatments have stopped have been described anecdotally but not investigated in controlled trials. The article concludes that further high quality randomized trials are needed to provide more robust data about the effectiveness of acupuncture in FMS. 2 tables and 25 references. (AA-M).

- **Acupuncture: A History**

Source: *Scientific Review of Alternative Medicine*. 3(1): 34-41. Spring-Summer 1999.

Summary: This journal article reviews the history of acupuncture and critiques its evolution from a Western scientific perspective. It traces the history of acupuncture in China from its earliest mention in documents from the second century B.C. through the early 1900's, the era of Mao Tse-tung and the Cultural Revolution, to the present. It also explores issues in assessing acupuncture within the Western scientific framework. Then, it describes how unsubstantiated reports from China during the 1970's led to a rapid increase in the popularity of acupuncture before it had been scientifically assessed. Finally, it reviews findings from modern research into the analgesic effects of acupuncture. The author concludes that the concept of ch'i has no basis in human physiology, meridians have not been shown to exist, and high-quality scientific studies have failed to demonstrate that the use of traditional Chinese acupuncture is associated with more effective pain relief than either placebo or counterirritant stimulation such as transcutaneous electrical nerve stimulation. The article has 142 references.

- **Current Licensure for Acupuncture in the United States**

Source: *Alternative Therapies in Health and Medicine*. 5(4): 94-96. July 1999.

Summary: This journal article reviews current licensure and certification standards for acupuncture in the United States. Two national organizations are responsible for certifying acupuncture training and practice. The Accreditation Commission of Acupuncture and Oriental Medicine establishes accreditation criteria and evaluates curricula of acupuncture training programs. The National Certification Commission of Acupuncture and Oriental Medicine certifies individuals to practice acupuncture based on established standards for educational attainment and competence. Although nationally recognized standards exist, requirements for training and licensure are independently determined by each state. Thirty-three states and the District of Columbia currently award a license in acupuncture, 16 do not, and 1 has not made an official ruling. Among physicians, 43 states recognize acupuncture within their scope of practice; 8 of these states specify requirements for additional training. This article provides a table outlining the practice regulations by state for acupuncturists, physicians, chiropractors, dentists, podiatrists, and naturopaths. It also describes typical acupuncture training curricula for physicians and chiropractors. The article has 1 table and 2 references.

- **Acupuncture: Its Use in Medicine**

Source: *Western Journal of Medicine*. 171(3): 176-180. September 1999.

Summary: This journal article reviews Eastern and Western perspectives on acupuncture and summarizes research into its efficacy. The first part outlines the history of acupuncture in the West, compares traditional Chinese and Western views of acupuncture's mechanism of action and reviews reports of adverse reactions from acupuncture. The second part summarizes findings from the National Institutes of Health Office of Alternative Medicine consensus panel on acupuncture, and from the authors' own review of published meta-analyses and systematic literature reviews. It also explores challenges in acupuncture research, including the use of classical versus formula acupuncture and the choice of an adequate placebo as a control intervention. Finally, it looks at strategies for introducing alternative medicine into the Western medical setting and reviews licensure and training requirements for acupuncturists in the United States. The article has 2 figures, 1 table, and 31 references.

- **Overview of Medical Acupuncture**

Source: *Alternative Therapies in Health and Medicine*. 4(3): 35-45. May 1998.

Summary: This journal article provides an overview of the role of medical acupuncture in contemporary Western health care. The first section reviews the history and development of the practice of acupuncture. The second section summarizes the main concepts in classical acupuncture, and the third section discusses modern concepts incorporating current understandings of neuromuscular anatomy and pain physiology with the traditional Chinese concepts. The fourth section describes typical provider-patient interactions in medical acupuncture practice, including the physical examination, differential diagnosis, and treatment planning. The fifth section describes acupuncture treatment options, procedures, schedules, and followup evaluations. The sixth section discusses the treatment uses of medical acupuncture, including its utility for treating musculoskeletal pain, its limitations for other conditions, potential risks, preventive value, scope of practice, and complementary treatments. The last section

addresses training and quality assurance in medical acupuncture, reimbursement policies, and future prospects. The article has 5 figures and 5 references.

- **NIH Consensus Conference: Acupuncture**

Source: JAMA. Journal of the American Medical Association. 280(17): 1518-1524. November 4, 1998.

Summary: This journal article presents the findings of the consensus conference on acupuncture, sponsored by the Office of Alternative Medicine and the Office of Medical Applications of Research, National Institutes of Health. The purpose of the conference was to provide clinicians, patients, and the general public with a reliable assessment of the use and effectiveness of acupuncture for a variety of conditions. A multidisciplinary panel evaluated evidence presented by experts and in the scientific literature, and developed a consensus statement addressing five issues: the efficacy of acupuncture compared with placebo or sham acupuncture, the place of acupuncture in clinical practice, the biological effects of acupuncture, the integration of acupuncture into the health care system, and directions for future research. The panel concluded that many of the efficacy studies of acupuncture provide equivocal results because of design, sample size, and other factors. The issue is further complicated by inherent difficulties in the use of appropriate controls. However, promising results have emerged showing the efficacy of acupuncture for adult postoperative and chemotherapy nausea and vomiting, and in postoperative dental pain. In other conditions such as addiction, stroke rehabilitation, headache, menstrual cramps, fibromyalgia, myofascial pain, osteoarthritis, tennis elbow, low back pain, carpal tunnel syndrome, and asthma, acupuncture may be useful as an adjunct treatment, an acceptable alternative, or part of a comprehensive management plan. This article has 66 references.

- **Homeopathy and Rheumatic Disease**

Source: Rheumatic Disease Clinics of North America. 26(1): 117-123. February 2000.

Summary: This journal article provides health professionals with information on the use of homeopathy to treat rheumatic disease. Homeopathy is one of the most frequently sought alternative therapies for treating rheumatic syndromes. Homeopathy was developed by the German physician Samuel Christian Hahnemann in the latter half of the 18th century. There are two main tenets of homeopathy. One is the principle of similars. This principle states that patients with a particular pattern of signs and symptoms can be cured if they are given a drug that produces the same pattern of signs and symptoms when given to a healthy individual. The second tenet in homeopathy is that remedies retain biological activity if they are diluted and agitated or shaken between serial dilutions. This tenet has often led scientists to reject homeopathy out of hand, without looking at evidence for its effects in clinical trials. Unfortunately, the current number of controlled clinical trials on the treatment of rheumatic syndromes with homeopathy is few, and results are mixed. Rheumatic arthritis has been the most studied, and only small studies have been done on osteoarthritis, fibromyalgia, and the myalgias. Overall, it appears that homeopathic remedies work better than a placebo in studies of rheumatic syndromes; however, there are too few studies to draw definitive conclusions about the efficacy of any one type of homeopathic treatment on any one condition. 25 references. (AA-M).

Federally Funded Research on Alternative Medicine

The U.S. Government supports a variety of research studies relating to alternative medicine. These studies are tracked by the Office of Extramural Research at the National Institutes of Health.² CRISP (Computerized Retrieval of Information on Scientific Projects) is a searchable database of federally funded biomedical research projects conducted at universities, hospitals, and other institutions.

Search the CRISP Web site at http://crisp.cit.nih.gov/crisp/crisp_query.generate_screen. You will have the option to perform targeted searches by various criteria, including geography, date, and topics related to alternative medicine.

For most of the studies, the agencies reporting into CRISP provide summaries or abstracts. As opposed to clinical trial research using patients, many federally funded studies use animals or simulated models to explore alternative medicine. The following is typical of the type of information found when searching the CRISP database for alternative medicine:

- **Project Title: ADOLESCENTS USE OF COMPLEMENTARY ALTERNATIVE MEDICINE**

Principal Investigator & Institution: Klein, Jonathan D. Assistant Professor; Pediatrics; University of Rochester Orpa - Rc Box 270140 Rochester, Ny 14627

Timing: Fiscal Year 2001; Project Start 5-FEB-2001; Project End 1-DEC-2002

Summary: (APPLICANT'S ABSTRACT): Alternative therapies and herbal remedies are increasingly recognized as having therapeutic value, and as many as 42% adults use some form of complementary and alternative medicine (CAM). The prevalence of CAM use among adolescents is not known. Questions remain about the safety and efficacy of some CAM therapies, and how to best facilitate communication about alternative medicine between patients and clinicians. Research with adults shows that most do not reveal their use of alternative therapies to their providers. Adolescence is a time of experimentation and the beginning of a shift from depending upon parents to taking responsibility for one's own care. Thus, the health practices begun in adolescence have an impact into adulthood. However, none of the current guidelines for the provision of care to adolescents advise asking about complementary or alternative medicine use. Finally, adolescents are exposed to increasing coverage of CAM in the media, and on the internet. The specific aims of this study are to: 1) determine the prevalence of complementary and alternative medicine use among a representative sample of adolescents, 2) describe the range of therapies adolescents use, and where they are procured, 3) describe adolescent and clinician factors that are associated with communication between adolescents and their providers about complementary and alternative medicine, and 4) describe adolescents' exposure to information about CAM from sources such as parents, providers, and the media, and how this impacts CAM use. We propose a cross sectional random digit dial telephone survey of 1200 adolescents in Monroe County, NY. Our findings will allow us to understand how adolescents use alternative medicine. Additionally, since alternative therapies can have potentially serious side-effects or drug interactions, insight into how and when alternative medicine use is disclosed may help clinicians provide better care to adolescents.

² Healthcare projects are funded by the National Institutes of Health (NIH), Substance Abuse and Mental Health Services (SAMHSA), Health Resources and Services Administration (HRSA), Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDCP), Agency for Healthcare Research and Quality (AHRQ), and Office of Assistant Secretary of Health (OASH).

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: ALTERNATIVE MEDICINE:IMPLICATIONS FOR CLINICAL PRACTICE**

Principal Investigator & Institution: Eisenberg, David M. Instructor in Medicine; Beth Israel Deaconess Medical Center E/Es-214 Boston, Ma 02215

Timing: Fiscal Year 2001; Project Start 5-JUN-2001; Project End 8-FEB-2002

Summary: The purpose of this application is to request partial support for an annual educational conference entitled, "Complementary and Alternative Medicine: Implications for Clinical Practice." This conference, sponsored annually by the Center for Alternative Medicine Research and Education and the Department of Medicine of Harvard Medical School, has been offered each year since 1995. Its faculty is composed of leaders from the CAM community, including NIH funded investigators and Center directors, CAM practitioners and educators, CAM policy makers, as well as leading CAM investigators from the international community. In this R-13 application, we seek support from the National Center for Complementary and Alternative Medicine in order to maintain and improve this established annual CAM conference. Funds being requested will be used to: 1) Provide partial support for key personnel responsible for course planning, implementation and evaluation; 2) Provide partial support for travel and accommodations associated with course faculty, the majority of whom are investigators sponsored by NCCAM, as well as CAM practitioners, educators and policy makers; 3) Provide partial support for audio-video equipment to ensure access for individuals with disabilities; 4) Enable the course directors to further refine and expand the course, including efforts to increase minority representation of course faculty and to increase participation by CAM investigators from the international community; 5) Enable course directors to schedule a post-course evaluation session the day after the course so that participating faculty can make specific recommendations for continued refinement of the program on a year to year basis.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: CENTER FOR ALTERNATIVE MEDICINE RESEARCH OF ARTHRITIS**

Principal Investigator & Institution: Berman, Brian M. Director; Family Medicine; University of Maryland Balt Prof School Baltimore, Md 21201

Timing: Fiscal Year 2001; Project Start 0-SEP-1999; Project End 1-JUL-2004

Summary: Arthritis and related musculoskeletal disorders are a leading cause of disability, and usage of complementary and alternative medicine (CAM) interventions is particularly high among those with the severest forms of these conditions. Although largely unproven, these therapies are commonly sought by those experiencing the severest disease and frequently used in combination with other alternative or conventional treatments. There is, thus, a great unmet need to evaluate the safety, efficacy, and cost-effectiveness of these CAM interventions in a collaborative setting in which experts in rheumatology, complementary medicine, epidemiology, statistics and health services research approach these questions in a scientifically rigorous, multi-disciplinary manner. The major objective of this application is the establishment of a specialized center for research in complementary and alternative medicine (CAM) focusing on arthritis and related diseases at the University of Maryland Baltimore. The Center for Alternative Medicine Evaluation and Research in Arthritis (CAMERA) will support a multi-disciplinary team of researchers and develop institutional and regional

collaborations to conduct clinical and basic research exploring the potential efficacy, safety, and cost-effectiveness of long-term outcomes following acupuncture treatment for osteoarthritis of the knee; 2) the effectiveness of mind/body therapies for fibromyalgia; 3) the mechanism of action and effects of electroacupuncture on persistent pain & inflammation; and 4) the mechanism of action of a herbal combination with immunomodulatory properties. The Center will create core resource facilities to support, monitor and evaluate its research activities. Future investigation of CAM and arthritis and related disorders will be encouraged through: 1) the training of new investigators in the Center's Career Development & Training Program, and 2) the Development and Feasibility Research Program, which will solicit, meritoriously evaluate and support innovative pilot research.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: COMPLEMENTARY ALTERNATIVE MEDICINE**

Principal Investigator & Institution: Loera, Jose A. Internal Medicine; University of Texas Medical Br Galveston 301 University Blvd Galveston, Tx 77555

Timing: Fiscal Year 2001; Project Start 0-SEP-2001; Project End 1-AUG-2006

Summary: I became interested in underserved populations at an early stage of my professional career and was attracted by the fact that in a country where pharmacies dispensed most medications without a physician's prescription the use of herbal medicines was quite prevalent. I have had the opportunity of participating in establishing community-based health programs that incorporated alternative therapies in some underserved indigenous reservation populations in Canada. Since joining the University of Texas Medical Branch in 1993, as assistant professor in the Department of Internal Medicine, Geriatric Medicine Division, I have joined the UTMB Hispanic Established Populations for the Epidemiologic Study of the Elderly team. This year I prepared a manuscript reporting the findings on the frequency and patterns of use of herbal medicine by elderly Mexican Americans in five Southwestern States based on the first wave collected in 1993-94 and has been submitted to The Journal of Gerontology, Medical Sciences. During the period of preparation of the manuscript I was able to determine that my limited knowledge in epidemiology and statistical analysis were major barriers for me in completing this manuscript. The mentored clinical scientist development award will give me the opportunity to improve my knowledge and understanding of science that will help me communicate, participate, assist in the design of studies and analysis of data. I will be able to work more closely with the researchers of the Sealy Center on Aging and the Hispanic EPESE team. This study is the largest population-based survey of Mexican American elderly to providing information on use of herbal medicine. Little is known at the population-level as to the patterns of alternative medicine use by the fastest growing population of minority elderly in the US. This study's aims are: to determine the prevalence and patterns of complementary and alternative medicine among Mexican American elderly, compare varying patterns of alternative medicine use in terms of their associations with chronic health conditions, and assess the influence of alternative medicine use on the physical, functional, and mental, health of older Mexican Americans.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: COMPLEMENTARY AND ALTERNATIVE MEDICINE DATA ARCHIVE**

Principal Investigator & Institution: Peterson, James L.; Sociometrics Corporation 170 State St, Ste 260 Los Altos, Ca 94022

Timing: Fiscal Year 2002; Project Start 0-SEP-2002; Project End 0-JUN-2004

Summary: (provided by applicant): The goal of this project is to foster evidence-based research in complementary and alternative medicine through the secondary analysis of scientifically sound CAM datasets. It will do this by facilitating access to, and statistical analysis of original individual-level data from outstanding scientific datasets through the creation of an international CAM Data Archive (CAMDA). The archive will comprise three kinds of machine-readable materials: (1) approximately 30-50 exemplary datasets, fully documented and made compatible with a variety of popular statistical software programs and operating systems; (2) the measurement instruments, questionnaires, and protocols (in machine-readable and searchable PDF format) that correspond to the datasets; and (3) HTML and Adobe-based search and retrieval software to identify those portions of the datasets and measurement instruments relevant to user-specified research questions and keywords. Each archived study will also include a standardized printed and machine-readable User's Guide describing the study, its contents, and important analysis notes. The archive will be easy to use, fast, and efficient. It will serve the widest possible user constituency, health researchers, social scientists, educators, students, and policy makers, and maximize its availability by offering all its products on CD-ROM and as downloadable files on the Internet through Sociometrics' Socionet server. PROPOSED COMMERCIAL APPLICATION: Prospective users of CAMDA include researchers, health practitioners, policy-makers, educators, students, and other health and social science data consumers. These groups represent a potential for tens of thousands of individual and institutional sales. Sociometrics current data archives have sold over \$158,000 in total volume, an increase of 40% in the last 9 months of this year. In light of the value-added features associated with CAMDA, we expect it to match and exceed this pace.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: COMPLEMENTARY/ALTERNATIVE MEDICINE FOR VESTIBULOPATHY**

Principal Investigator & Institution: Krebs, David E. Professor; Massachusetts General Hospital 55 Fruit St Boston, Ma 02114

Timing: Fiscal Year 2001; Project Start 1-MAY-2001; Project End 1-MAR-2003

Summary: (APPLICANT'S ABSTRACT): It is proposed a randomized, blinded, controlled trial comparing vestibular rehabilitation (VR) to Tai Chi. Our overall goal is to explore whether, and if so, how TC can improve functional, dynamic stability in persons with vestibulopathy (VSP). It is hypothesized that the TC group will demonstrate significantly greater improvement in performing functional activities than the VR group. Specific Aims #1: To determine the relative neuro-biomechanical benefits of TC and VR. Sixty subjects will be randomly assigned into either TC instruction or VR. Both treatment groups will receive identical duration treatment once a week for 10 weeks, with supplemental home exercises. It is hypothesized that 1) TC improves whole-body dynamic locomotor stability more than does VR; 2) TC improves gait coordination during planned and unplanned obstacle encounters more than does VR; 3) TC improves whole-body speed related movement control more than does VR. #2: To determine which biomechanical measures best demonstrate TC and VR motor control and coordination improvements. It is proposed to quantify VSP patients' motor control and coordination using muscle power flow, gaze (eyehead) stability, and whole-body dynamic stability during standing, locomotion and balance perturbations. It is hypothesized that 1) The TC group will demonstrate power flow more similar to healthy individuals than those receiving VIA during locomotion and balance recovery

following perturbation; 2) The TC group will demonstrate greater improvements in intersegmental movement coordination, which in turn, translates into improved gaze and whole-body stability, than the VR group. #3: A) To determine whether TC improves psychological status, including fear of falling. B) To determine the association between both psychological variables and TCM medical diagnosis, and their predictive value about response to TC or VR. It is hypothesized that TC will improve both fear of falling and other psychological scores more than VR. It will also be diagnosed each patient according to traditional Chinese medicine (TCM) diagnostic categories to determine whether any TCM category is more likely to be associated with improvements in either group. The latter aim is purely exploratory and descriptive in nature.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: CRANIOFACIAL COMPLEMENTARY & ALTERNATIVE MEDICINE CENTER**

Principal Investigator & Institution: White, B Alexander.; Kaiser Foundation Research Institute 1800 Harrison St, 16Th Fl Oakland, Ca 94612

Timing: Fiscal Year 2001; Project Start 0-SEP-1999; Project End 1-JUL-2004

Summary: This proposal establishes the Oregon Center for Complementary and Alternative Medicine Research in Craniofacial Disorders (OCCAM). OCCAM will develop the resources necessary for rigorous scientific investigation of complementary and alternative medicine (CAM) approaches to diagnosing and managing craniofacial disorders (CFD). OCCAM will be based at the Kaiser Permanente Center for Health Research. Through OCCAM, the Oregon College of Oriental Medicine (COCM), National College of Naturopathic Medicine (NCNM), Western States Chiropractic Dentistry (SoD) and Clinical Research Center (CRC), and Kaiser Permanente Northwest Division (KPNW)-all of which are based in Portland-will collaborate to conduct research on the potential efficacy, effectiveness, acceptability, effects on health care resource use, and psychosocial and other health outcomes associated with CAM practices for CFDs as well as the physiological and psychological mechanisms underlying some of these practices. Further, this center will enable us to train and mentor young investigators who are interested in developing a CAM application are three Phase II clinical trials: Complementary Medicine Approaches to TMD Pain Management; Alternative Medicine Approaches Among Women with TMD; and Complementary Naturopathic Medicine for Periodontitis. To provide support for these projects and for OCCAM, we propose four core groups: the Administrative Core, the Biostatistics and Economics ore, the Measurement and Adherence Core, and the Laboratory Core. With the propose management strategy and external Advisory Committee, the OCCAM will provide a unique research collaboration between conventional and CAM communities to address many important questions about CFD prevention, diagnosis, and treatment. Importantly, OCCAM and the participating institutions are committed to these collaborative efforts and bring additional institutional commitment beyond the funds requested in this proposal.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: CRANIOFACIAL COMPLEMENTARY & ALTERNATIVE MEDICINE CENTER**

Principal Investigator & Institution: Vuckovic, Nancy H. Investigator; Kaiser Foundation Research Institute 1800 Harrison St, 16Th Fl Oakland, Ca 94612

Timing: Fiscal Year 2002; Project Start 0-SEP-1999; Project End 1-JUL-2004

Summary: This proposal establishes the Oregon Center for Complementary and Alternative Medicine Research in Craniofacial Disorders (OCCAM). OCCAM will develop the resources necessary for rigorous scientific investigation of complementary and alternative medicine (CAM) approaches to diagnosing and managing craniofacial disorders (CFD). OCCAM will be based at the Kaiser Permanente Center for Health Research. Through OCCAM, the Oregon College of Oriental Medicine (COCM), National College of Naturopathic Medicine (NCNM), Western States Chiropractic Dentistry (SoD) and Clinical Research Center (CRC), and Kaiser Permanente Northwest Division (KPNW)-all of which are based in Portland-will collaborate to conduct research on the potential efficacy, effectiveness, acceptability, effects on health care resource use, and psychosocial and other health outcomes associated with CAM practices for CFDs as well as the physiological and psychological mechanisms underlying some of these practices. Further, this center will enable us to train and mentor young investigators who are interested in developing a CAM application are three Phase II clinical trials: Complementary Medicine Approaches to TMD Pain Management; Alternative Medicine Approaches Among Women with TMD; and Complementary Naturopathic Medicine for Periodontitis. To provide support for these projects and for OCCAM, we propose four core groups: the Administrative Core, the Biostatistics and Economics ore, the Measurement and Adherence Core, and the Laboratory Core. With the propose management strategy and external Advisory Committee, the OCCAM will provide a unique research collaboration between conventional and CAM communities to address many important questions about CFD prevention, diagnosis, and treatment. Importantly, OCCAM and the participating institutions are committed to these collaborative efforts and bring additional institutional commitment beyond the funds requested in this proposal.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: FINDING QUALITY ALTERNATIVE MEDICINE INFORMATION**

Principal Investigator & Institution: Tanner, T Bradley. President; Clinical Tools, Inc. 431 W Franklin St, #30 Chapel Hill, Nc 27516

Timing: Fiscal Year 2001; Project Start 5-SEP-2001; Project End 8-FEB-2002

Summary: This SBIR fast-track application proposes to develop, evaluate, and implement a unique Web-based guide for Internet browsers seeking quality complementary and alternative medicine (CAM) websites. The site will direct health information seekers via a structured approach to assist, them in defining their CAM information needs and then using these needs to find appropriate websites. Websites will be cataloged in a database indexing ownership or authorship disclosure, purpose, standards met, language support, and user experience. The guide will also catalogue support for features such as Q&A, bulletin boards, chat, news, MEDLINE searches, email lists, and screening forms. Users will be able to provide structured feedback on the listed sites to other health information seekers as well as to the website developer. The guide could be used to help developers of existing and future CAM websites enhance and improve their content. In Phase I we will create and evaluate a prototype site that indexes Internet resources on the topic of herbs. Phase II will extend the site to a broad range of topics in complementary and alternative medicine and evaluate the site's utility for both consumers and physicians. PROPOSED COMMERCIAL APPLICATIONS: As access to the Internet becomes more common, increasing numbers of consumers and professionals are seeking health information on the Web, especially for CAM information. There are currently few means by which a health information seeker can quickly identify websites that meet his or her needs. The product of this

research will be of value to online advertisers as well as Internet portals interested in expanding the value of their service.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: RESEARCH AND MENTORSHIP IN ALTERNATIVE MEDICINE**

Principal Investigator & Institution: Phillips, Russell S.; Beth Israel Deaconess Medical Center E/Es-214 Boston, Ma 02215

Timing: Fiscal Year 2001; Project Start 5-SEP-2001; Project End 1-AUG-2006

Summary: (provided by applicant): Dr. Phillips is a clinician-researcher dedicated to patient-oriented research. He directs the Harvard Faculty Development and Fellowship Program in Complementary and Alternative Medicine, which is supported by a T32 Institutional Training Grant from the NIH National Center for Complementary and Alternative Medicine. Dr. Phillips has a long history of successful mentorship. He has mentored 29 trainees, nearly all of whom are productive clinical researchers. In recognition of his talents, he was awarded the prestigious A. Clifford Barger Award and Excellence in Mentorship at Harvard Medical School. Currently, he mentors the work of trainees in complementary and alternative medicine (CAM). His career objective is to become a leading academic investigator in CAM, and to direct an exemplary CAM research training program. He proposes specific training for himself in CAM practice, including attending educational programs on homeopathy, mindfulness-based stress reduction, and botanical medicine. Dr. Phillips directs a well-funded research program in the Center for Alternative Medicine Research at Beth Israel Deaconess Medical Center. He proposes to use the funded research program in the Center, and the Fellowship Program to provide comprehensive research training for young investigators to perform patient-oriented CAM research, and to prepare these trainees for careers as independent investigators. The Fellowship Program provides advanced courses in research methods, and clinical CAM experiences. Dr. Phillips provides research mentorship and helps fellows to develop and complete research projects. Ongoing funded research projects described in this proposal include clinical trials as well as descriptive epidemiologic studies. Fellows are given opportunities to become involved in ongoing projects that match their interests and to develop their own CAM research. Pilot randomized controlled trials on Tai Chi, magnet therapy, and chiropractic being performed by current fellows are described in this proposal as examples for the types of projects Dr. Phillips' fellows will conceptualize, develop, implement, analyze and publish with his mentorship.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: TRAINING IN COMPLEMENTARY AND ALTERNATIVE MEDICINE(CAM)**

Principal Investigator & Institution: Fishman, Alfred P. Senior Associate Dean; Medicine; University of Pennsylvania 3451 Walnut Street Philadelphia, Pa 19104

Timing: Fiscal Year 2001; Project Start 1-JUL-2001; Project End 0-JUN-2006

Summary: (Provided by applicant): As part of the continuing response of the University of Pennsylvania Medical Center to a two-year study by a Working Group appointed by the CEO-Dean, The Office of the Senior Dean for Program Development, The Steering Committee on Complimentary Alternative Medicine, and The Center for Clinical Epidemiology and Biostatistics (CCEB) propose to build on existing strengths at the University of Pennsylvania to develop an innovative and rigorous two-to-three-year training program for clinical investigators in Complementary and Alternative Medicine

(CAM). The mission of the CAM Training Program will be to prepare clinicians who have completed their clinical training for successful careers as independent clinical investigators capable of using the range of approaches available in epidemiology and biostatistics to address research issues related to evaluation of complementary therapies and treatment with alternative medicine. The general design for the training program is to supplement formal training in research with mentoring by paired mentors: one in the practice of CAM and the other expert in outcomes research. The two-to-three-year training program will consist of: 1) a core curriculum of required courses in clinical epidemiology, research methodology, and biostatistics; 2) elective courses in CAM; 3) extensive independent readings; 4) attendance and participation in research seminars at the CCEB and conferences on CAM; and 5) the completion of an independent research project in CAM. The program is designed to: 1) provide an in depth knowledge of the research techniques appropriate to clinical epidemiology research; 2) provide opportunities for study of topics related to CAM; 3) provide research experience with mentors in clinical epidemiology research and practitioners of complementary medicine; and 4) bring together faculty and fellows through participation in seminar series in the CCEB and conferences and workshops in CAM. Trainees will be candidates for a MS degree in Clinical Epidemiology. Contrary to a MPH degree, this program is similar to a PhD in its rigor.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: TRAINING PROGRAM IN COMPLEMENTARY & ALTERNATIVE MEDICINE**

Principal Investigator & Institution: Taylor, Ann G. Professor, School of Nursing; None; University of Virginia Charlottesville Box 400195 Charlottesville, Va 22904

Timing: Fiscal Year 2001; Project Start 8-SEP-2000; Project End 0-JUN-2005

Summary: DESCRIPTON (Applicant's Abstract): This application proposes a research training program to prepare postdoctoral trainees (M.D.s and Ph.D.s) for successful careers in complementary therapies research (referred to also as complementary and alternative medicine-CAM). Included also will be pre-doctoral trainees who are enrolled in a health professionals program leading to either the Ph.D. or the M.D. degree and who are interested in research training experiences related to CAM. The program is an interdisciplinary effort among three major schools at the University of Virginia (medicine, nursing, engineering and applied sciences- its Department of Biomedical Engineering) and the Center for the Study of Complementary and Alternative Therapies (CSCAT). Postdoctoral trainees will participate in courses offered through the Department of Health Evaluation Sciences (HES), the General Clinical Research Center, Center for Nursing Research, and the Multidisciplinary Training Program in Clinical Investigation. Pre-doctoral trainees will complete the professional training curricula of the Schools of Medicine or Nursing or the Department of Biomedical Engineering, a course in complementary therapies and optional courses from the Department of HES and other departments offering research training courses that will round out their training need for CAM-related research. Mentors will be selected from established researchers in the collaborating schools/departments who represent conventional practitioners and researchers, basic scientists and credentialed CAM practitioners. Postdoctoral trainees, who qualify and have an interest in earning a Masters degree with specialization in CAM research training will have the opportunity to do so if they wish to add a third year to the research training program. Postdoctoral trainees will devote the two years to preparation in grant/scientific writing; mentored research experiences in an area of interest related to CAM; and coursework that rounds out their preparation

depending upon their prior relevant training. A course in evidence-based complementary therapies is included in the coursework. Core coursework addresses requirements of research training and will emphasize issues and concerns in CAM-related research. Trainees will acquire the needed knowledge and skills for successful careers in CAM research.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

- **Project Title: WOMEN'S USE OF ALTERNATIVE MEDICINE: A MULTIETHNIC STUDY**

Principal Investigator & Institution: Chao, Maria T. Sociomedical Sciences; Columbia University Health Sciences Ogc New York, Ny 10032

Timing: Fiscal Year 2003; Project Start 5-MAR-2003; Project End 4-MAR-2005

Summary: (provided by applicant): National surveys have estimated widespread and increasing use of complementary and alternative medicine (CAM), which encompasses a multiplicity of healing systems, treatments, and techniques. Indicators of higher socioeconomic status (SES), such as greater levels of education and income, are factors commonly associated with greater CAM use. Whether these factors consistently predict use across different types of CAM or within minority populations has not been systematically explored. Possible mechanisms influencing the SES-CAM relationship, such as health status or acculturation, also warrant further exploration. The proposed study will explore the relationship between SES and the use of CAM among white, African- Mexican-, and Chinese-American women. First, the overall race-ethnic patterns of CAM use across different domains of CAM will be examined. Then, within each of the four racial-ethnic populations of women, the proposed study will: 1. Assess the association between SES and CAM use, comparing overall CAM usage and use of specific CAM domains, 2. Test the mediating effects of health status and access to biomedicine in the relationship between SES and CAM use, 3. Analyze the differential influence of social networks in the SES-CAM relationship, and 4. Evaluate the moderating effects of acculturation in the relationship between SES and CAM use (among Mexican- and Chinese-American women only). Specific CAM domains to be studied include physical therapies, mind-body therapies, vitamins/nutritional supplements, herbs and medicinal teas, and cultural healing. Overall use of CAM will also be examined. Hypotheses will be tested using data from a national study examining women's use of CAM in four racial-ethnic populations, which is funded through the National Institute of Child Health and Human Development and the National Center for Complementary and Alternative Medicine.

Website: http://crisp.cit.nih.gov/crisp/Crisp_Query.Generate_Screen

E-Journals: PubMed Central³

PubMed Central (PMC) is a digital archive of life sciences journal literature developed and managed by the National Center for Biotechnology Information (NCBI) at the U.S. National Library of Medicine (NLM).⁴ Access to this growing archive of e-journals is free and

³ Adapted from the National Library of Medicine: <http://www.pubmedcentral.nih.gov/about/intro.html>.

⁴ With PubMed Central, NCBI is taking the lead in preservation and maintenance of open access to electronic literature, just as NLM has done for decades with printed biomedical literature. PubMed Central aims to become a world-class library of the digital age.

unrestricted.⁵ To search, go to <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=Pmc>, and type “alternative medicine” (or synonyms) into the search box. This search gives you access to full-text articles. The following is a sample of items found for alternative medicine in the PubMed Central database:

- **Adverse events following acupuncture: prospective survey of 32 000 consultations with doctors and physiotherapists.** by White A, Hayhoe S, Hart A, Ernst E. 2001 Sep 1; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=48133>
- **Assessing the quality of reports of randomized trials in pediatric complementary and alternative medicine.** by Moher D, Sampson M, Campbell K, Beckner W, Lepage L, Gaboury I, Berman B. 2002; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=99046>
- **Assessing the quality of reports of systematic reviews in pediatric complementary and alternative medicine.** by Moher D, Soeken K, Sampson M, Ben-Porat L, Berman B. 2002; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=99047>
- **Complementary or alternative medicine: the need for plausibility.** by Hoffer LJ. 2003 Jan 21; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&rendertype=external&artid=140428>
- **Electroacupuncture versus Diclofenac in symptomatic treatment of Osteoarthritis of the knee: a randomized controlled trial.** by Sangdee C, Teekachunhatean S, Sananpanich K, Sugandhavesa N, Chiewchantanakit S, Pojchamarnwiputh S, Jayasvasti S. 2002; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=102323>
- **Information-seeking behavior in complementary and alternative medicine (CAM): an online survey of faculty at a health sciences campus.** by Owen DJ, Fang ML. 2003 Jul; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=164394>
- **Message to complementary and alternative medicine: evidence is a better friend than power.** by Vickers AJ. 2001; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=32159>
- **More provinces protecting MDs who practise alternative medicine.** by Silversides A. 2002 Feb 5; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&rendertype=external&artid=99334>
- **Pseudoaneurysm of the Popliteal Artery A Rare Sequela of Acupuncture.** by Kao CL, Chang JP. 2002; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=116740>
- **Randomised trial of acupuncture compared with conventional massage and "sham" laser acupuncture for treatment of chronic neck pain.** by Irnich D, Behrens N, Molzen H, Konig A, Gleditsch J, Krauss M, Natalis M, Senn E, Beyer A, Schops P. 2001 Jun 30; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=33515>
- **Randomized controlled trials in pediatric complementary and alternative medicine: Where can they be found?** by Sampson M, Campbell K, Ajiferuke I, Moher D. 2003; <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=151673>

⁵ The value of PubMed Central, in addition to its role as an archive, lies in the availability of data from diverse sources stored in a common format in a single repository. Many journals already have online publishing operations, and there is a growing tendency to publish material online only, to the exclusion of print.

- **Relatively Alcohol-Resistant Mycobacteria Are Emerging Pathogens in Patients Receiving Acupuncture Treatment.** by Woo PC, Leung KW, Wong SS, Chong KT, Cheung EY, Yuen KY. 2002 Apr;
<http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&rendertype=external&artid=140401>
- **Systematic reviews of complementary therapies -- an annotated bibliography. Part 3: Homeopathy.** by Linde K, Hondras M, Vickers A, Riet GT, Melchart D. 2001;
<http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=45586>
- **Systematic reviews of complementary therapies - an annotated bibliography. Part 1: Acupuncture.** by Linde K, Vickers A, Hondras M, ter Riet G, Thormahlen J, Berman B, Melchart D. 2001;
<http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=37539>
- **Teaching Evidence-Based Complementary and Alternative Medicine (EBCAM); Changing behaviours in the face of reticence: A cross-over trial.** by Mills E, Hollyer T, Saranchuk R, Wilson K. 2002;
<http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=65045>
- **The York acupuncture safety study: prospective survey of 34 000 treatments by traditional acupuncturists.** by MacPherson H, Thomas K, Walters S, Fitter M. 2001 Sep 1;
<http://www.pubmedcentral.gov/articlerender.fcgi?tool=pmcentrez&artid=48134>

The National Library of Medicine: PubMed

One of the quickest and most comprehensive ways to find academic studies in both English and other languages is to use PubMed, maintained by the National Library of Medicine.⁶ The advantage of PubMed over previously mentioned sources is that it covers a greater number of domestic and foreign references. It is also free to use. If the publisher has a Web site that offers full text of its journals, PubMed will provide links to that site, as well as to sites offering other related data. User registration, a subscription fee, or some other type of fee may be required to access the full text of articles in some journals.

To generate your own bibliography of studies dealing with alternative medicine, simply go to the PubMed Web site at <http://www.ncbi.nlm.nih.gov/pubmed>. Type "alternative medicine" (or synonyms) into the search box, and click "Go." The following is the type of output you can expect from PubMed for "alternative medicine" (hyperlinks lead to article summaries):

- **A phase I study on the feasibility and acceptability of an acupuncture/hypnosis intervention for chronic pediatric pain.**
Author(s): Zeltzer LK, Tsao JC, Stelling C, Powers M, Levy S, Waterhouse M.
Source: Journal of Pain and Symptom Management. 2002 October; 24(4): 437-46.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12505213&dopt=Abstract

⁶ PubMed was developed by the National Center for Biotechnology Information (NCBI) at the National Library of Medicine (NLM) at the National Institutes of Health (NIH). The PubMed database was developed in conjunction with publishers of biomedical literature as a search tool for accessing literature citations and linking to full-text journal articles at Web sites of participating publishers. Publishers that participate in PubMed supply NLM with their citations electronically prior to or at the time of publication.

- **A prospective, randomized pilot trial of acupuncture of the kidney-bladder distinct meridian for lower urinary tract symptoms.**
Author(s): Johnstone PA, Bloom TL, Niemtow RC, Crain D, Riffenburgh RH, Amling CL.
Source: The Journal of Urology. 2003 March; 169(3): 1037-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12576840&dopt=Abstract
- **A review of the evidence for the effectiveness, safety, and cost of acupuncture, massage therapy, and spinal manipulation for back pain.**
Author(s): Cherkin DC, Sherman KJ, Deyo RA, Shekelle PG.
Source: Annals of Internal Medicine. 2003 June 3; 138(11): 898-906. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12779300&dopt=Abstract
- **Activation of mast cells by silver particles in a patient with localized argyria due to implantation of acupuncture needles.**
Author(s): Kakurai M, Demitsu T, Umemoto N, Ohtsuki M, Nakagawa H.
Source: The British Journal of Dermatology. 2003 April; 148(4): 822.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12752148&dopt=Abstract
- **Acupuncture ameliorates symptoms in men with chronic prostatitis/chronic pelvic pain syndrome.**
Author(s): Chen R, Nickel JC.
Source: Urology. 2003 June; 61(6): 1156-9; Discussion 1159.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12809886&dopt=Abstract
- **Acupuncture anaesthesia in inguinal hernia repair.**
Author(s): Chu DW, Lee DT, Chan TT, Chow TL, Que MB, Kwok SP.
Source: Anz Journal of Surgery. 2003 March; 73(3): 125-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12608974&dopt=Abstract
- **Acupuncture and arthroscopic acromioplasty.**
Author(s): Gilbertson B, Wenner K, Russell LC.
Source: Journal of Orthopaedic Research : Official Publication of the Orthopaedic Research Society. 2003 July; 21(4): 752-8.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12798078&dopt=Abstract
- **Acupuncture and bronchial asthma: a long-term randomized study of the effects of real versus sham acupuncture compared to controls in patients with bronchial asthma.**
Author(s): Medici TC, Grebski E, Wu J, Hinz G, Wuthrich B.

Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2002 December; 8(6): 737-50; Discussion 751-4.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12614526&dopt=Abstract

- **Acupuncture and moxibustion for treating ectopic endometrium.**
Author(s): Wang H, Hou Q.
Source: J Tradit Chin Med. 2002 September; 22(3): 203-4. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12400429&dopt=Abstract
- **Acupuncture and smoking cessation: pinning down the claims.**
Author(s): Crane R.
Source: American Journal of Public Health. 2003 February; 93(2): 187.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12554565&dopt=Abstract
- **Acupuncture and spinal cord medicine.**
Author(s): Paola FA, Arnold M.
Source: J Spinal Cord Med. 2003 Spring; 26(1): 12-20. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12830963&dopt=Abstract
- **Acupuncture and swallowing reflex in poststroke patients.**
Author(s): Seki T, Kurusu M, Tanji H, Arai H, Sasaki H.
Source: Journal of the American Geriatrics Society. 2003 May; 51(5): 726-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12752859&dopt=Abstract
- **Acupuncture as a promising treatment for below-level central neuropathic pain: a retrospective study.**
Author(s): Rapson LM, Wells N, Pepper J, Majid N, Boon H.
Source: J Spinal Cord Med. 2003 Spring; 26(1): 21-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12830964&dopt=Abstract
- **Acupuncture during labor can reduce the use of meperidine: a controlled clinical study.**
Author(s): Nesheim BI, Kinge R, Berg B, Alfredsson B, Allgot E, Hove G, Johnsen W, Jorsett I, Skei S, Solberg S.
Source: The Clinical Journal of Pain. 2003 May-June; 19(3): 187-91.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12792557&dopt=Abstract
- **Acupuncture for gastrointestinal disorders.**
Author(s): Ishida Y.
Source: Gut. 2003 April; 52(4): 614.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12631688&dopt=Abstract

- **Acupuncture for tennis elbow: an E-mail consensus study to define a standardised treatment in a GPs' surgery.**
 Author(s): Webster-Harrison P, White A, Rae J.
 Source: Acupunct Med. 2002 December; 20(4): 181-5.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12512792&dopt=Abstract
- **Acupuncture for the treatment of obesity: a review of the evidence.**
 Author(s): Lacey JM, Tershakovec AM, Foster GD.
 Source: International Journal of Obesity and Related Metabolic Disorders : Journal of the International Association for the Study of Obesity. 2003 April; 27(4): 419-27. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12664074&dopt=Abstract
- **Acupuncture for treating postoperative enteroparalysis.**
 Author(s): Zheng Z.
 Source: J Tradit Chin Med. 2003 March; 23(1): 42. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747197&dopt=Abstract
- **Acupuncture has no immediate treatment effect on the neutrophil respiratory burst: a randomized single-blinded two-period crossover study.**
 Author(s): Karst M, Scheinichen D, Rueckert T, Wagner T, Wiese B, Fink M.
 Source: Brain, Behavior, and Immunity. 2002 December; 16(6): 813-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12480510&dopt=Abstract
- **Acupuncture in clinical neurology.**
 Author(s): Rabinstein AA, Shulman LM.
 Source: The Neurologist. 2003 May; 9(3): 137-48. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12808410&dopt=Abstract
- **Acupuncture in pain medicine: an integrated approach to the management of refractory pain.**
 Author(s): Ahadian FM.
 Source: Current Pain and Headache Reports. 2002 December; 6(6): 444-51.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12413403&dopt=Abstract
- **Acupuncture inhibits sympathetic activation during mental stress in advanced heart failure patients.**
 Author(s): Middlekauff HR, Hui K, Yu JL, Hamilton MA, Fonarow GC, Moriguchi J, Maclellan WR, Hage A.
 Source: Journal of Cardiac Failure. 2002 December; 8(6): 399-406.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12528093&dopt=Abstract
- **Acupuncture treatment for 157 cases of anxiety neurosis.**
 Author(s): Zhang H, Zeng Z, Deng H.

Source: J Tradit Chin Med. 2003 March; 23(1): 55-6. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747204&dopt=Abstract

- **Acupuncture treatment for 57 cases of hiccup.**
Author(s): Chen X.
Source: J Tradit Chin Med. 2002 September; 22(3): 195-6. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12400426&dopt=Abstract
- **Acupuncture treatment for osteoarthritic pain and inflammation of the knee.**
Author(s): Kumar AM, Wen XL.
Source: Alternative Therapies in Health and Medicine. 2002 November-December; 8(6): 128, 126.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12440848&dopt=Abstract
- **Acupuncture treatment of facial paralysis caused by craniocerebral trauma in 50 cases.**
Author(s): Zhao J.
Source: J Tradit Chin Med. 2003 March; 23(1): 47-8. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747200&dopt=Abstract
- **Acupuncture treatment of melancholia.**
Author(s): Hu J.
Source: J Tradit Chin Med. 2003 March; 23(1): 75-7. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747209&dopt=Abstract
- **Acupuncture treatment of pain dysfunction syndrome after dental extraction.**
Author(s): Rosted P, Jorgensen V.
Source: Acupunct Med. 2002 December; 20(4): 191-2.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12512794&dopt=Abstract
- **Acupuncture used in the management of pain due to arthropathy in a patient with haemophilia.**
Author(s): Rosted P, Jorgensen V.
Source: Acupunct Med. 2002 December; 20(4): 193-5.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12512795&dopt=Abstract
- **Acupuncture versus placebo versus sumatriptan for early treatment of migraine attacks: a randomized controlled trial.**
Author(s): Melchart D, Thormaehlen J, Hager S, Liao J, Linde K, Weidenhammer W.
Source: Journal of Internal Medicine. 2003 February; 253(2): 181-8.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12542558&dopt=Abstract

- **Acupuncture. Essential information for nurse practitioners.**
 Author(s): Capili B, Weinberg AR.
 Source: Adv Nurse Pract. 2003 February; 11(2): 81-5. Review. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12640825&dopt=Abstract

- **Acupuncture: a physician's primer, Part II.**
 Author(s): Altshuler LH, Maher JH.
 Source: J Okla State Med Assoc. 2003 January; 96(1): 13-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12632848&dopt=Abstract

- **Acupuncture: archaic or biologic?**
 Author(s): Ulett GA.
 Source: American Journal of Public Health. 2003 July; 93(7): 1037; Author Reply 1037-8.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12835171&dopt=Abstract

- **Acupuncture: evidence for its use in chronic low back pain.**
 Author(s): Henderson H.
 Source: British Journal of Nursing (Mark Allen Publishing). 2002 November 28-December 11; 11(21): 1395-403. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12514474&dopt=Abstract

- **Acupuncture: neuropeptide release produced by electrical stimulation of different frequencies.**
 Author(s): Han JS.
 Source: Trends in Neurosciences. 2003 January; 26(1): 17-22. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12495858&dopt=Abstract

- **Acupuncture: the best of the rest.**
 Author(s): Thayer T.
 Source: Saad Dig. 2002 July; 19(3): 5-8. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12613346&dopt=Abstract

- **Alternative medicine: homeopathy.**
 Author(s): Harling M.
 Source: Nurs Times. 1975 October 23; 71(43): 1694-6. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=1196934&dopt=Abstract

- **An overview of acupuncture medicine.**
 Author(s): Hurtak JJ.

Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2002 October; 8(5): 535-8. Erratum In: J Altern Complement Med. 2003 February; 9(1): 179.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12470432&dopt=Abstract

- **Attitudes to the contribution of placebo in acupuncture--a survey.**
Author(s): Norheim AJ, Fonnebo V.
Source: Complementary Therapies in Medicine. 2002 December; 10(4): 202-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12594970&dopt=Abstract
- **Botulinum toxin: application into acupuncture points for migraine.**
Author(s): Tamura BM, Chang B.
Source: Dermatologic Surgery : Official Publication for American Society for Dermatologic Surgery [et Al.]. 2003 July; 29(7): 749-54.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12828700&dopt=Abstract
- **Bridging the gap in complementary and alternative medicine research: manualization as a means of promoting standardization and flexibility of treatment in clinical trials of acupuncture.**
Author(s): Schnyer RN, Allen JJ.
Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2002 October; 8(5): 623-34. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12470444&dopt=Abstract
- **Bruce Pomeranz, PHD. Acupuncture and the raison d'etre for alternative medicine. Interview by Bonnie Horrigan.**
Author(s): Pomeranz B.
Source: Alternative Therapies in Health and Medicine. 1996 November; 2(6): 85-91.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=8942049&dopt=Abstract
- **Cervical spondylopathy involving the vertebral arteries treated by body-acupuncture combined with scalp-acupuncture in 72 cases.**
Author(s): Li B, Chai F, Gao H.
Source: J Tradit Chin Med. 2002 September; 22(3): 197-9. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12400427&dopt=Abstract
- **Characteristics and quality of systematic reviews of acupuncture, herbal medicines, and homeopathy.**
Author(s): Linde K, ter Riet G, Hondras M, Melchart D, Willich SN.
Source: Forschende Komplementarmedizin Und Klassische Naturheilkunde = Research in Complementary and Natural Classical Medicine. 2003 April; 10(2): 88-94.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12808368&dopt=Abstract

- **Clinical experience in electro-acupuncture treatment.**
 Author(s): Sun L.
 Source: J Tradit Chin Med. 2003 March; 23(1): 40-1. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747196&dopt=Abstract
- **Clinical trial of acupuncture for patients with spinal cord injuries.**
 Author(s): Wong AM, Leong CP, Su TY, Yu SW, Tsai WC, Chen CP.
 Source: American Journal of Physical Medicine & Rehabilitation / Association of Academic Physiatrists. 2003 January; 82(1): 21-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12510181&dopt=Abstract
- **Complementary and alternative medicine, science, acupuncture, transcranial electromagnetic stimulation, herbs, and communication: present challenges, possibilities from the past, and potential for the future.**
 Author(s): Jobst KA.
 Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 1997 Winter; 3(4): 303-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=9449050&dopt=Abstract
- **Complementary medicine in pediatrics: a review of acupuncture, homeopathy, massage, and chiropractic therapies.**
 Author(s): Breuner CC.
 Source: Curr Probl Pediatr Adolesc Health Care. 2002 November-December; 32(10): 353-84. Review. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12486401&dopt=Abstract
- **Convulsive syncope associated with acupuncture.**
 Author(s): Cole M, Shen J, Hommer D.
 Source: The American Journal of the Medical Sciences. 2002 November; 324(5): 288-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12449453&dopt=Abstract
- **Cutaneous electrical stimulation of acupuncture points may enhance gastric myoelectrical regularity.**
 Author(s): Chang CS, Chou JW, Ko CW, Wu CY, Chen GH.
 Source: Digestion. 2002; 66(2): 106-11.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12428070&dopt=Abstract
- **Different modes of manual acupuncture stimulation differentially modulate cerebral blood flow velocity, arterial blood pressure and heart rate in human subjects.**
 Author(s): Backer M, Hammes MG, Valet M, Deppe M, Conrad B, Tolle TR, Dobos G.

Source: Neuroscience Letters. 2002 November 29; 333(3): 203-6. Erratum In: Neurosci Lett. 2003 February 6; 337(2): 117.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12429383&dopt=Abstract

- **Does acupuncture improve motor recovery after stroke? A meta-analysis of randomized controlled trials.**
Author(s): Sze FK, Wong E, Or KK, Lau J, Woo J.
Source: Stroke; a Journal of Cerebral Circulation. 2002 November; 33(11): 2604-19.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12411650&dopt=Abstract
- **Does acupuncture improve the orthopedic management of chronic low back pain--a randomized, blinded, controlled trial with 3 months follow up.**
Author(s): Molsberger AF, Mau J, Pawelec DB, Winkler J.
Source: Pain. 2002 October; 99(3): 579-87.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12406534&dopt=Abstract
- **Effect of acupuncture on the neutrophil respiratory burst: a placebo-controlled single-blinded study.**
Author(s): Karst M, Scheinichen D, Rueckert T, Wagner T, Wiese B, Piepenbrock S, Fink M.
Source: Complementary Therapies in Medicine. 2003 March; 11(1): 4-10.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12667969&dopt=Abstract
- **Effect of electroacupuncture and transcutaneous electrical nerve stimulation at Hegu (LI.4) acupuncture point on the cutaneous reflex.**
Author(s): Chang QY, Lin JG, Hsieh CL.
Source: Acupuncture & Electro-Therapeutics Research. 2002; 27(3-4): 191-202.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12638739&dopt=Abstract
- **Effects of electro-acupuncture on psychological distress in postmenopausal women.**
Author(s): Sandberg M, Wijma K, Wyon Y, Nedstrand E, Hammar M.
Source: Complementary Therapies in Medicine. 2002 September; 10(3): 161-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12568145&dopt=Abstract
- **Efficacy of acupuncture in asthma: systematic review and meta-analysis of published data from 11 randomised controlled trials.**
Author(s): Martin J, Donaldson AN, Villarroel R, Parmar MK, Ernst E, Higginson IJ.
Source: The European Respiratory Journal : Official Journal of the European Society for Clinical Respiratory Physiology. 2002 October; 20(4): 846-52. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12412674&dopt=Abstract
- **'Electro-acupuncture in a child with mild spastic hemiplegic cerebral palsy'.**
Author(s): Svedberg L, Nordahl G, Lundeberg T.

Source: *Developmental Medicine and Child Neurology*. 2003 July; 45(7): 503-4.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12828407&dopt=Abstract

- **Homeopathy, other forms of alternative medicine sources of ongoing debate among physicians, patients.**
 Author(s): Rosen A.
 Source: *Cmaj : Canadian Medical Association Journal = Journal De L'association Medicale Canadienne*. 1995 June 1; 152(11): 1887-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=7773909&dopt=Abstract

- **Is acupuncture an useful tool for pain-treatment in ophthalmology?**
 Author(s): Nepp J, Jandrasits K, Schauersberger J, Schild G, Wedrich A, Sabine GL, Spacek A.
 Source: *Acupuncture & Electro-Therapeutics Research*. 2002; 27(3-4): 171-82.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12638737&dopt=Abstract

- **Is acupuncture safe? A systematic review of case reports.**
 Author(s): Lao L, Hamilton GR, Fu J, Berman BM.
 Source: *Alternative Therapies in Health and Medicine*. 2003 January-February; 9(1): 72-83. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12564354&dopt=Abstract

- **Laser acupuncture and low-calorie diet during visceral obesity therapy after menopause.**
 Author(s): Wozniak P, Stachowiak G, Pieta-Dolinska A, Oszukowski P.
 Source: *Acta Obstetrica Et Gynecologica Scandinavica*. 2003 January; 82(1): 69-73.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12580844&dopt=Abstract

- **Localized argyria 20-years after embedding of acupuncture needles.**
 Author(s): Takeishi E, Hirose R, Hamasaki Y, Katayama I.
 Source: *Eur J Dermatol*. 2002 November-December; 12(6): 609-11. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12459543&dopt=Abstract

- **Long-term high-frequency electro-acupuncture stimulation prevents neuronal degeneration and up-regulates BDNF mRNA in the substantia nigra and ventral tegmental area following medial forebrain bundle axotomy.**
 Author(s): Liang XB, Liu XY, Li FQ, Luo Y, Lu J, Zhang WM, Wang XM, Han JS.
 Source: *Brain Research. Molecular Brain Research*. 2002 December; 108(1-2): 51-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12480178&dopt=Abstract

- **National Institutes of Health Office of Alternative Medicine-Food and Drug Administration Workshop on Acupuncture.**
 Author(s): Eskinazi DP, Jobst KA.

Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 1996 Spring; 2(1): 3-6.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=9395635&dopt=Abstract

- **Neurogenic pruritus: an unrecognised problem? A retrospective case series of treatment by acupuncture.**
Author(s): Stellon A.
Source: Acupunct Med. 2002 December; 20(4): 186-90.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12512793&dopt=Abstract
- **Non-pharmacological approaches to chronic headaches: transcutaneous electrical nerve stimulation, lasertherapy and acupuncture in transformed migraine treatment.**
Author(s): Allais G, De Lorenzo C, Quirico PE, Lupi G, Airola G, Mana O, Benedetto C.
Source: Neurological Sciences : Official Journal of the Italian Neurological Society and of the Italian Society of Clinical Neurophysiology. 2003 May; 24 Suppl 2: S138-42.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811613&dopt=Abstract
- **Peroneal nerve palsy following acupuncture treatment. A case report.**
Author(s): Sato M, Katsumoto H, Kawamura K, Sugiyama H, Takahashi T.
Source: The Journal of Bone and Joint Surgery. American Volume. 2003 May; 85-A(5): 916-8.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12728045&dopt=Abstract
- **Placebo controls in randomized trials of acupuncture.**
Author(s): Vickers AJ.
Source: Evaluation & the Health Professions. 2002 December; 25(4): 421-35.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12449085&dopt=Abstract
- **Pregnancy outcome following women's participation in a randomised controlled trial of acupuncture to treat nausea and vomiting in early pregnancy.**
Author(s): Smith C, Crowther C, Beilby J.
Source: Complementary Therapies in Medicine. 2002 June; 10(2): 78-83.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12481955&dopt=Abstract
- **Pressure applied on the extra 1 acupuncture point reduces bispectral index values and stress in volunteers.**
Author(s): Fassoulaki A, Paraskeva A, Patris K, Pourgiezi T, Kostopanagiotou G.
Source: Anesthesia and Analgesia. 2003 March; 96(3): 885-90, Table of Contents.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12598279&dopt=Abstract
- **Relationship of acupuncture points and meridians to connective tissue planes.**
Author(s): Langevin HM, Yandow JA.

Source: The Anatomical Record. 2002 December 15; 269(6): 257-65.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12467083&dopt=Abstract

- **Relief of chronic neck and shoulder pain by manual acupuncture to tender points--a sham-controlled randomized trial.**
 Author(s): Nabeta T, Kawakita K.
 Source: Complementary Therapies in Medicine. 2002 December; 10(4): 217-22.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12594972&dopt=Abstract

- **Reporting of clinical details in randomized controlled trials of acupuncture for the treatment of migraine/headaches and nausea/vomiting.**
 Author(s): Elorriaga Claraco A, Hanna SE, Fargas-Babjak A.
 Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2003 February; 9(1): 151-9. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12676043&dopt=Abstract

- **Reviews of acupuncture for chronic neck pain: pitfalls in conducting systematic reviews.**
 Author(s): White P, Lewith G, Berman B, Birch S.
 Source: Rheumatology (Oxford, England). 2002 November; 41(11): 1224-31. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12421994&dopt=Abstract

- **Role of acupuncture in the treatment of female infertility.**
 Author(s): Chang R, Chung PH, Rosenwaks Z.
 Source: Fertility and Sterility. 2002 December; 78(6): 1149-53. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12477502&dopt=Abstract

- **Side-effects associated with acupuncture and a sham treatment: perhaps we should take a closer look at what is really responsible?**
 Author(s): Lewith GT, White P.
 Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2003 February; 9(1): 16-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12676030&dopt=Abstract

- **Staphylococcus aureus subcutaneous abscess complicating acupuncture: need for implementation of proper infection control guidelines.**
 Author(s): Woo PC, Lau SK, Wong SS, Yuen KY.
 Source: New Microbiol. 2003 April; 26(2): 169-74. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12737199&dopt=Abstract

- **Testimony to the Office of Alternative Medicine workshop on acupuncture.**
 Author(s): Kaltsas HJ.

Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 1996 Spring; 2(1): 37-8; Discussion 41-3.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=9395640&dopt=Abstract

- **Testing strategies to reduce diarrhea in persons with HIV using traditional Chinese medicine: acupuncture and moxibustion.**

Author(s): Anastasi JK, McMahon DJ.

Source: The Journal of the Association of Nurses in Aids Care : Janac. 2003 May-June; 14(3): 28-40.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12800810&dopt=Abstract

- **The effect of acupuncture on the acute withdrawal symptoms from rapid opiate detoxification.**

Author(s): Montazeri K, Farahnakian M, Saghaei M.

Source: Acta Anaesthesiol Sin. 2002 December; 40(4): 173-7.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12596615&dopt=Abstract

- **The effect of acupuncture on the temperature of the ocular surface in conjunctivitis sicca measured by non-contact thermography: preliminary results.**

Author(s): Nepp J, Tsubota K, Goto E, Schauersberger J, Schild G, Jandrasits K, Abela C, Wedrich A.

Source: Advances in Experimental Medicine and Biology. 2002; 506(Pt A): 723-6.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12613984&dopt=Abstract

- **The effect of auricular acupuncture on anaesthesia with desflurane.**

Author(s): Taguchi A, Sharma N, Ali SZ, Dave B, Sessler DI, Kurz A.

Source: Anaesthesia. 2002 December; 57(12): 1159-63.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12437705&dopt=Abstract

- **The effects of acupuncture on blood pressure in different patients.**

Author(s): Guo W, Ni G.

Source: J Tradit Chin Med. 2003 March; 23(1): 49-50.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747201&dopt=Abstract

- **The experience of acupuncture for treatment of substance dependence.**

Author(s): Bernstein KS.

Source: Journal of Nursing Scholarship : an Official Publication of Sigma Theta Tau International Honor Society of Nursing / Sigma Theta Tau. 2000; 32(3): 267-72.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12462821&dopt=Abstract

- **The impact of site specificity and needle manipulation on changes to pain pressure threshold following manual acupuncture: a controlled study.**

Author(s): Zaslawski CJ, Cobbin D, Lidums E, Petocz P.

Source: *Complementary Therapies in Medicine*. 2003 March; 11(1): 11-21.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12667970&dopt=Abstract

- **The placebo response and effect of time in a trial of acupuncture to treat nausea and vomiting in early pregnancy.**
 Author(s): Smith C, Crowther C.
 Source: *Complementary Therapies in Medicine*. 2002 December; 10(4): 210-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12594971&dopt=Abstract

- **The reporting of clinical acupuncture research: what do clinicians need to know?**
 Author(s): Claraco AE, Fargas-Babjak A, Hanna SE.
 Source: *Journal of Alternative and Complementary Medicine (New York, N.Y.)*. 2003 February; 9(1): 143-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12676042&dopt=Abstract

- **The role of acupuncture in the treatment of urologic conditions.**
 Author(s): Ripoll E, Bunn T.
 Source: *World Journal of Urology*. 2002 November; 20(5): 315-8. Epub 2002 October 23. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12522589&dopt=Abstract

- **The sharp end of medical practice: the use of acupuncture in obstetrics and gynaecology.**
 Author(s): Renckens CN.
 Source: *Bjog : an International Journal of Obstetrics and Gynaecology*. 2002 December; 109(12): 1418-9.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12504990&dopt=Abstract

- **The sharp end of medical practice: the use of acupuncture in obstetrics and gynecology.**
 Author(s): Zeisler H, Husslein P.
 Source: *Bjog : an International Journal of Obstetrics and Gynaecology*. 2002 December; 109(12): 1419.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12504991&dopt=Abstract

- **Traditional Chinese medicine, acupuncture, and other alternative medicines for prostate cancer: an introduction and the need for more research.**
 Author(s): Moyad MA, Hathaway S, Ni HS.
 Source: *Semin Urol Oncol*. 1999 May; 17(2): 103-10. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=10332924&dopt=Abstract

- **Treatment of monosymptomatic nocturnal enuresis by acupuncture: A preliminary study.**
Author(s): Honjo H, Kawauchi A, Ukimura O, Soh J, Mizutani Y, Miki T.
Source: International Journal of Urology : Official Journal of the Japanese Urological Association. 2002 December; 9(12): 672-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12492950&dopt=Abstract
- **Treatment of phlegm- and heat-induced insomnia by acupuncture in 120 cases.**
Author(s): Cui R, Zhou D.
Source: J Tradit Chin Med. 2003 March; 23(1): 57-8. No Abstract Available.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12747205&dopt=Abstract
- **Treatment of retinal vein obstruction with acupuncture and Chinese medicinal herbs.**
Author(s): Zhu X, Bi A, Han X.
Source: J Tradit Chin Med. 2002 September; 22(3): 211-3.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12400431&dopt=Abstract
- **Trigger point--acupuncture point correlations revisited.**
Author(s): Birch S.
Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2003 February; 9(1): 91-103. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12676038&dopt=Abstract
- **Urinary tract infections and acupuncture.**
Author(s): Katz AR.
Source: American Journal of Public Health. 2003 May; 93(5): 702; Author Reply 702-3.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12721123&dopt=Abstract
- **Using acupuncture to treat premenstrual syndrome.**
Author(s): Habek D, Habek JC, Barbir A.
Source: Archives of Gynecology and Obstetrics. 2002 November; 267(1): 23-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12410369&dopt=Abstract
- **Validating a new non-penetrating sham acupuncture device: two randomised controlled trials.**
Author(s): Park J, White A, Stevinson C, Ernst E, James M.
Source: Acupunct Med. 2002 December; 20(4): 168-74.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12512790&dopt=Abstract

CHAPTER 2. NUTRITION AND ALTERNATIVE MEDICINE

Overview

In this chapter, we will show you how to find studies dedicated specifically to nutrition and alternative medicine.

Finding Nutrition Studies on Alternative Medicine

The National Institutes of Health's Office of Dietary Supplements (ODS) offers a searchable bibliographic database called the IBIDS (International Bibliographic Information on Dietary Supplements; National Institutes of Health, Building 31, Room 1B29, 31 Center Drive, MSC 2086, Bethesda, Maryland 20892-2086, Tel: 301-435-2920, Fax: 301-480-1845, E-mail: ods@nih.gov). The IBIDS contains over 460,000 scientific citations and summaries about dietary supplements and nutrition as well as references to published international, scientific literature on dietary supplements such as vitamins, minerals, and botanicals.⁷

As a service of the ODS, access to the IBIDS database is available free of charge at the following Web address: <http://ods.od.nih.gov/databases/ibids.html>. After entering the search area, you have three choices: (1) IBIDS Consumer Database, (2) Full IBIDS Database, or (3) Peer Reviewed Citations Only.

Now that you have selected a database, click on the "Advanced" tab. An advanced search allows you to retrieve up to 100 fully explained references in a comprehensive format. Type "alternative medicine" (or synonyms) into the search box, and click "Go." To narrow the search, you can also select the "Title" field.

⁷ Adapted from <http://ods.od.nih.gov>. IBIDS is produced by the Office of Dietary Supplements (ODS) at the National Institutes of Health to assist the public, healthcare providers, educators, and researchers in locating credible, scientific information on dietary supplements. IBIDS was developed and will be maintained through an interagency partnership with the Food and Nutrition Information Center of the National Agricultural Library, U.S. Department of Agriculture.

The following is a typical result when searching for recently indexed consumer information on alternative medicine:

- **Alternative medicine and prostate cancer.**
Source: Harv-Mens-Health-Watch. 2001 December; 6(5): 4-6 1089-1102
- **Alternative medicine. Natural approaches to menopause.**
Source: Harv-Womens-Health-Watch. 2001 October; 9(2): 6-7 1070-910X
- **Alternative medicine. Study finds glucosamine doesn't work.**
Source: Anonymous Harv-Health-Lett. 2000 June; 25(8): 3 1052-1577
- **Alternative medicine. Wedding bells or divorce papers?**
Source: Anonymous Harv-Health-Lett. 2000 January; 25(3): 8 1052-1577
- **Alternative medicine. What works...maybe.**
Source: Anonymous Harv-Health-Lett. 2001 January; 26(3): 1-2 1052-1577
- **Alternative medicine. Willow bark for low back pain.**
Source: Anonymous Harv-Health-Lett. 2000 November; 26(1): 3 1052-1577
- **American Diabetes Association 60th Scientific Sessions, 2000: nutrition, lipids, and alternative medicine.**
Author(s): Division of Endocrinology, Mount Sinai School of Medicine, New York, New York, USA.
Source: Bloomgarden, Z T Diabetes-Care. 2000 December; 23(12): 1847-51 0149-5992
- **Cures or 'quackery'? How Senator Harkin shaped federal research on alternative medicine.**
Source: Budiansky, S US-News-World-Rep 1995 July 17; 119(3): 48-51 0041-5537
- **Guidelines for responsible nutrition counseling on complementary and alternative medicine.**
Source: Shapiro, A.C. Reddan, J. Winters, B. Hamilton, K. Nutr-today. Hagerstown, Md. : Lippincott Williams & Wilkins. Nov/December 2001. volume 36 (6) page 291-297. 0029-666X
- **Medical journals report on herbal and alternative medicine: articles in AMA journals contrast with NEJM.**
Source: Blumenthal, M. HerbalGram. Austin, TX : American Botanical Council and the Herb Research Foundation. Spring 1999. (46) page 29-34, 51. 0899-5648
- **The prevalence and pattern of complementary and alternative medicine use in individuals with diabetes.**
Author(s): McClennan-Banks Adult Primary Care Clinic, Medical University of South Carolina, P.O. Box 250100, Charleston, SC 29425, USA. egedel@musc.edu
Source: Egede, Leonard E Ye, Xiaobou Zheng, Deyi Silverstein, Marc D Diabetes-Care. 2002 February; 25(2): 324-9 0149-5992

The following information is typical of that found when using the "Full IBIDS Database" to search for "alternative medicine" (or a synonym):

- **A primer of complementary and alternative medicine and its relevance in the treatment of mental health problems.**
Author(s): New York Medical College, Valhalla, NY 10595, USA.
Source: Mamtani, R Cimino, A Psychiatr-Q. 2002 Winter; 73(4): 367-81 0033-2720

- **A profile of journals of complementary and alternative medicine.**
 Author(s): Department of Complementary Medicine, School of Postgraduate Medicine and Health Sciences, University of Exeter, Exeter, United Kingdom. Kschmidt@exeter.ac.uk
 Source: Schmidt, K Pittler, M H Ernst, E Swiss-Med-Wkly. 2001 October 6; 131(39-40): 588-91 1424-7860
- **Adolescents' use of complementary and alternative medicine.**
 Author(s): University of Rochester School of Medicine and Dentistry, Children's Hospital at Strong, Rochester, NY 14642, USA.
 Source: Wilson, Karen M Klein, Jonathan D Ambul-Pediatr. 2002 Mar-April; 2(2): 104-10 1530-1567
- **Alternative medicine and behavior.**
 Author(s): Department of Anatomy, Physiology, and Cell Biology, School of Veterinary Medicine, University of California at Davis, Davis, CA, USA.
 Source: Cooper, Leslie Larson Clin-Tech-Small-Anim-Pract. 2002 February; 17(1): 50-7 1096-2867
- **Alternative medicine and cancer patients in less developed countries.**
 Author(s): Jawaharlal Nehru Cancer Hospital And Research Centre, Bhopal, India.
 Source: Chaturvedi, P Chaturvedi, U Sanyal, B Lancet-Oncol. 2002 January; 3(1): 10 1470-2045
- **Alternative medicine and medical malpractice. Emerging issues.**
 Source: Doyle, A J-Leg-Med. 2001 December; 22(4): 533-52 0194-7648
- **Alternative medicine for the conventional cardiologist.**
 Author(s): University of Connecticut School of Medicine, Farmington, Connecticut, USA.
 Source: Sinatra, S T Heart-Dis. 2000 Jan-February; 2(1): 16-30 1521-737X
- **Alternative medicine networks: build or buy?**
 Source: Iverson, Caroline R Manag-Care-Interface. 2002 January; 15(1): 86-9
- **Alternative medicine--boom or bust?**
 Author(s): The Section of Electrophysiology, Division of Cardiology, The University of Iowa Hospitals, Iowa City, IA 52242, USA. brian-olshansky@uiowa.edu
 Source: Olshansky, Brian Card-Electrophysiol-Revolume 2002 February; 6(1-2): 170-3 1385-2264
- **Alternative therapy of animals--homeopathy and other alternative methods of therapy.**
 Author(s): Department of Large Animal Clinical Sciences, Norwegian School of Veterinary Science, P.O. Box 8146 Dep., N-0033 Oslo.
 Source: Loken, T Acta-Vet-Scand-Suppl. 2001; 95: 47-50 0065-1699
- **An alternative view of complementary and alternative medicine.**
 Source: Gershen, Barton J Md-Med. 2002 Winter; 3(1): 29-31 1538-2656
- **Are there legal issues of concern for nurses when patients use complimentary and alternative medicine?**
 Author(s): Grace, Brandon, Hollis, LLP, San Diego, CA, USA. RCady@GBHlaw.com.
 Source: Cady, Rebecca MCN-Am-J-Matern-Child-Nurs. 2002 Mar-April; 27(2): 119 0361-929X
- **C.A.M. Complementary & alternative medicine. JCAHO includes CAM therapy.**
 Source: Weeks, John Health-Forum-J. 2002 Mar-April; 45(2): 33 1527-3547

- **C.A.M. Complementary & Alternative Medicine. More CAM available to patients.**
Author(s): sananth@healthforum.com
Source: Ananth, S Health-Forum-J. 2002 Sep-October; 45(5): 47 1527-3547
- **Categories of complementary and alternative medicine.**
Author(s): Montgomery County Medical Society, Rockville, Maryland, USA.
Source: Raskin, Susan A Md-Med. 2002 Winter; 3(1): 8-9 1538-2656
- **Communication between physicians and cancer patients about complementary and alternative medicine: exploring patients' perspectives.**
Author(s): Cancer Research Center of Hawaii, Honolulu, HI 96813, USA.
Source: Tasaki, Katsuya Maskarinec, Gertraud Shumay, Dianne M Tatsumura, Yvonne Kakai, Hisako Psychooncology. 2002 May-June; 11(3): 212-20 1057-9249
- **Complementary and alternative medicine (CAM) use by older adults: a comparison of self-report and physician chart documentation.**
Author(s): Brookdale Department of Geriatrics and Adult Development, Mount Sinai School of Medicine, New York, New York 10029-6574, USA.
Source: Cohen, Rebecca J Ek, Kirsten Pan, Cynthia X J-Gerontol-A-Biol-Sci-Med-Sci. 2002 April; 57(4): M223-7 1079-5006
- **Complementary and alternative medicine and the need for evidence-based criticism.**
Author(s): Complementary Medicine Program, University of Maryland School of Medicine, Baltimore, Maryland, USA. goldendawn@surfnetusa.com
Source: Astin, J A Acad-Med. 2002 September; 77(9): 864-8; discussion 869-75 1040-2446
- **Complementary and alternative medicine for neurologic disorders.**
Author(s): College of Veterinary Medicine, Iowa State University, Ames, IA 50011-1250, USA.
Source: Kline, Karen L Clin-Tech-Small-Anim-Pract. 2002 February; 17(1): 25-33 1096-2867
- **Complementary and alternative medicine for pain management in rheumatic disease.**
Author(s): Department of Complementary Medicine, School of Sport and Health Sciences, University of Exeter, Exeter, United Kingdom. E.Ernst@exeter.ac.uk
Source: Ernst, E Curr-Opin-Rheumatol. 2002 January; 14(1): 58-62 1040-8711
- **Complementary and alternative medicine in asthma: do they work?**
Author(s): Department of Internal Medicine, Medical Policlinic, University Hospital Zurich, Switzerland. claudia.stey@dim.usz.ch
Source: Steurer Stey, C Russi, E W Steurer, J Swiss-Med-Wkly. 2002 June 29; 132(25-26): 338-44 1424-7860
- **Complementary and alternative medicine in asthma--safety, effectiveness and costs.**
Source: Brutsche, M H Swiss-Med-Wkly. 2002 June 29; 132(25-26): 329-31 1424-7860
- **Complementary and alternative medicine in the undergraduate curriculum.**
Author(s): Medical Education Unit, School of Medicine, University of Leeds, UK. d.g.murdoch-eaton@leed.ac.uk
Source: Murdoch Eaton, Deborah Crombie, Helen Med-Teach. 2002 January; 24(1): 100-2 0142-159X
- **Complementary and alternative medicine research: a National Cancer Institute perspective.**
Author(s): Office of Cancer Complementary and Alternative Medicine, National Cancer Institute, National Institutes of Health, Executive Plaza North, Suite 102, Bethesda, MD 20892, USA.

Source: White, J D Semin-Oncol. 2002 December; 29(6): 546-51 0093-7754

- **Complementary and alternative medicine use among children in the Washington, DC area.**
 Author(s): Children's National Medical Center Pediatric Research Network and Department of Pediatrics, George Washington University School of Medicine, Washington, DC 20010, USA. Mottolin@cnmc.org
 Source: Ottolini, M C Hamburger, E K Loprieato, J O Coleman, R H Sachs, H C Madden, R Brasseur, C Ambul-Pediatr. 2001 Mar-April; 1(2): 122-5 1530-1567
- **Complementary and alternative medicine use in the Amish.**
 Author(s): Northeastern Ohio Universities College of Medicine, Department of Obstetrics and Gynecology, Akron General Medical Center, 44302, USA. vvongr@aol.com
 Source: von Gruenigen, V E Showalter, A L Gil, K M Frasure, H E Hopkins, M P Jenison, E L Complement-Ther-Med. 2001 December; 9(4): 232-3 0965-2299
- **Complementary and alternative medicine. The importance of doctor-patient communication.**
 Author(s): Department of Medicine, Saint Barnabas Medical Center, Livingston, New Jersey, USA.
 Source: Pappas, Sam Perlman, Adam Med-Clin-North-Am. 2002 January; 86(1): 1-10 0025-7125
- **Complementary/alternative medicine in chronic illness as informed self-care decision making.**
 Author(s): UBC School of Nursing, University of British Columbia, T201-2211 Westbrook Mall, Vancouver, BC, Canada V6T 2B5. thorne@nursing.ubc.ca
 Source: Thorne, S Paterson, B Russell, C Schultz, A Int-J-Nurs-Stud. 2002 September; 39(7): 671-83 0020-7489
- **Complementary/alternative medicine in dermatology: evidence-assessed efficacy of two diseases and two treatments.**
 Author(s): Department of Complementary Medicine, School of Sport and Health Sciences, University of Exeter, UK. E.Ernst@ex.ac.uk
 Source: Ernst, E Pittler, M H Stevinson, C Am-J-Clin-Dermatol. 2002; 3(5): 341-8 1175-0561
- **Cross-cultural differences in GPs' attitudes towards complementary and alternative medicine: a survey comparing regions of the UK and Germany.**
 Author(s): Department of Complementary Medicine, School of Sport and Health Sciences, University of Exeter, Exeter, UK. kschiidt@exeter.ac.uk
 Source: Schmidt, K Jacobs, P A Barton, A Complement-Ther-Med. 2002 September; 10(3): 141-7 0965-2299
- **Development of therapeutics: opportunities within complementary and alternative medicine.**
 Author(s): National Center for Complementary and Alternative Medicine (NCCAM), National Institutes of Health, 31 Center Drive, Bethesda, Maryland 20892, USA. engell@od.nih.gov
 Source: Engel, Linda W Straus, Stephen E Nat-Rev-Drug-Discovolume 2002 March; 1(3): 229-37 1474-1776

- **First year medical students' perceptions and use of complementary and alternative medicine.**
Author(s): Department of Primary Care & General Practice, University of Birmingham, UK. s.m.greenfield@bham.ac.uk
Source: Greenfield, S M Innes, M A Allan, T F Wearn, A M Complement-Ther-Med. 2002 March; 10(1): 27-32 0965-2299
- **Frequency of use of complementary and alternative medicine in women with breast cancer.**
Author(s): College of Nursing, University of South Florida, Tampa, FL, USA. clengach@hsc.usf.edu
Source: Lengacher, C A Bennett, M P Kip, K E Keller, R LaVance, M S Smith, L S Cox, C E Oncol-Nurs-Forum. 2002 Nov-December; 29(10): 1445-52 1538-0688
- **Guidelines for responsible nutrition counseling on complementary and alternative medicine.**
Source: Shapiro, A.C. Reddan, J. Winters, B. Hamilton, K. Nutr-today. Hagerstown, Md. : Lippincott Williams & Wilkins. Nov/December 2001. volume 36 (6) page 291-297. 0029-666X
- **Herbal therapies: what allergist-immunologists should know regarding patient use of complementary and alternative medicine.**
Author(s): Departments of Medicine, Pediatrics, and Pathology, Nassau University Medical Center, 2201 Hempstead Turnpike, East Meadow, NY 11554, USA.
Source: Frieri, M Allergy-Asthma-Proc. 2001 Jul-August; 22(4): 209-15 1088-5412
- **Informed consent in complementary and alternative medicine: current status and future needs.**
Author(s): Childhood Cancer Ombudsman Program, 27 Witch Duck Lane, Heathsville, VA 22473, USA.
Source: Monaco, G P Smith, G Semin-Oncol. 2002 December; 29(6): 601-8 0093-7754
- **Is there a rational basis underlying alternative medicine?**
Source: Rankin Box, D Campbell, K Nurs-Times. 2000 June 8-14; 96(23): 18 0954-7762
- **Marketing alternative medicine.**
Author(s): Cunningham Associates, Sacramento, USA. strawberry@lanset.com
Source: Cunningham, L Mark-Health-Servolume 2001 Winter; 21(4): 37-9 1094-1304
- **Medical merge. Alternative medicine case study.**
Author(s): akh@mgma.com
Source: Harner, Ariana MGMA-Connex. 2002 July; 2(6): 37-8 1537-0240
- **Physician use of complementary and alternative medicine (CAM) literature.**
Author(s): Department of Medicine, Faculty of Medicine, University of British Columbia, Vancouver, Canada.
Source: Wong H, C Neill J, C Complement-Ther-Med. 2001 September; 9(3): 173-7 0965-2299
- **Popularity of complementary and alternative medicine in Japan: a telephone survey.**
Author(s): Tsukuba College of Technology Clinic, Tsukuba, Japan. yamashita@k.tsukuba-tech.ac.jp
Source: Yamashita, H Tsukayama, H Sugishita, C Complement-Ther-Med. 2002 June; 10(2): 84-93 0965-2299

- **Potions, promises and paradoxes: complementary medicine and alternative medicine and malpractice law in Canada.**
 Author(s): Faculty of Law and Faculty of Medicine and Dentistry, Health Law Institute, University of Alberta.
 Source: Caulfield, T Feasby, C Health-Law-J. 2001; 9: 183-203 1192-8336
- **Problems and potentials of complementary and alternative medicine.**
 Author(s): Department of Medicine, Monash Medical School, Melbourne, Victoria, Australia. Kylie.O'Brien@baker.edu.au
 Source: O'Brien, K Intern-Med-J. 2002 April; 32(4): 163-4 1444-0903
- **Provider attitudes and use of alternative medicine in a midwestern medical practice in 2001.**
 Author(s): Gundersen Lutheran Medical Center, La Crosse, WI, USA.
 Source: Rooney, B Fiocco, G Hughes, P Halter, S WMJ. 2001; 100(7): 27-31
- **Psychiatric patients' experiences in complementary and alternative medicine (CAM), and in religious support--a pilot study.**
 Author(s): Department of Integral Psychiatry, Psychiatric Hospital Vrapce, Zagreb, Croatia.
 Source: Kozumplik, O Jukic, V Coll-Antropol. 2002 June; 26(1): 137-47 0350-6134
- **Regulation of complementary/alternative medicine: a Canadian perspective.**
 Author(s): University of Toronto, Ontario, Canada. heather.boon@utoronto.ca
 Source: Boon, H Complement-Ther-Med. 2002 March; 10(1): 14-9 0965-2299
- **Reimbursement for complimentary/alternative medicine by California HMOs.**
 Author(s): Valley Medical Center, San Jose, CA, USA.
 Source: Hughes, A Penner, M Manag-Care-Q. 2001 Fall; 9(4): 1-4 1064-5454
- **Rules to follow before advising patients on dietary supplements/alternative medicine: Part I.**
 Author(s): University of Michigan Medical Center, Department of Urology, Ann Arbor, MI, USA.
 Source: Moyad, M A Urol-Nurs. 2002 April; 22(2): 99-101, 104-10; quiz 111 1053-816X
- **Safety issues in using complementary and alternative medicine.**
 Author(s): Department of Hematology/Medical Oncology and Taussig Cancer Center, The Cleveland Clinic Foundation, Cleveland, OH 44195, USA. markman@ccf.org
 Source: Markman, M J-Clin-Oncol. 2002 September 15; 20(18 Suppl): 39S-41S 0732-183X
- **Social validation: an historian's look at complementary/alternative medicine.**
 Author(s): History of Medicine, Health Sciences Centre, Memorial University of Newfoundland, St John's, Canada. jcrellin@mun.ca
 Source: Crellin, J K Pharm-Hist-(Lond). 2001 September; 31(3): 43-51 0079-1393
- **Survey of the use of complementary and alternative medicine among Turkish cancer patients.**
 Author(s): Department of Public Health, Gulhane Military Medical Academy, Ankara, Turkey. sceylan_2000@yahoo.com
 Source: Ceylan, S Hamzaoglu, O Komurcu, S Beyan, C Yalcin, A Complement-Ther-Med. 2002 June; 10(2): 94-9 0965-2299
- **Survey on the use of complementary and alternative medicine among patients with headache syndromes.**
 Author(s): University of Witten/Herdecke, Germany.
 Source: von Peter, S Ting, W Scrivani, S Korkein, E Okvat, H Gross, M Oz, C Balmaceda, C Cephalalgia. 2002 June; 22(5): 395-400 0333-1024

- **The challenge of educating physicians about complementary and alternative medicine.**
Author(s): Department of Psychiatry and Behavioral Sciences, University of Miami School of Medicine, Miami, Florida 33101, USA. jkonefal@med.miami.edu
Source: Konefal, J Acad-Med. 2002 September; 77(9): 847-50 1040-2446
- **The growing acceptance of complementary and alternative medicine.**
Author(s): Center for Energy Medicine, Raleigh, North Carolina, USA.
Source: Bodane, Carrie Brownson, Kenneth Health-Care-Manag-(Frederick). 2002 March; 20(3): 11-21 1525-5794
- **The House Of Lords Select Committee for Science and Technology. Their report on complementary and alternative medicine and its implications for reflexology...**
Author(s): St George's Hospital Medical School, University of London.
Source: Wilkinson, I Complement-Ther-Nurs-Midwifery. 2002 May; 8(2): 91-100 1353-6117
- **The placebo effect and randomized trials: analysis of alternative medicine.**
Author(s): Department of Urology, University of Michigan Medical Center, 1500 East Medical Center Drive, Ann Arbor, MI 48109-0330, USA. moyad@umich.edu
Source: Moyad, Mark A Urol-Clin-North-Am. 2002 February; 29(1): 135-55, x 0094-0143
- **The prevalence and effectiveness of complementary and alternative medicine: what has been learned and what it may be telling us about our patients, ourselves, and conventional medical treatment.**
Author(s): Department of Surgery, University of Michigan Medical Center, Ann Arbor 48109-0330, USA.
Source: Moyad, M A Semin-Urol-Oncol. 2001 November; 19(4): 257-69 1081-0943
- **The role of alternative medicine in treating postnatal depression.**
Author(s): Department of Public and Community Health, Oxford Brookes University, Oxford.
Source: Mantle, F Br-J-Community-Nurs. 2001 July; 6(7): 363-8 1462-4753
- **The role of complementary and alternative medicine in attention-deficit hyperactivity disorder.**
Author(s): Division of General Pediatrics, Children's Hospital, Boston, Massachusetts 02115, USA. eugeniachan@onebox.com
Source: Chan, Eugenia J-Dev-Behav-Pediatr. 2002 February; 23(1 Suppl): S37-45 0196-206X
- **The teaching of complementary and alternative medicine in U.S. medical schools: a survey of course directors.**
Author(s): Department of Anatomy and Cell Biology, Indiana University School of Medicine, Indianapolis, 46202-5120, USA. jbrokaw@iupui.edu
Source: Brokaw, J J Tunnichiff, G Raess, B U Saxon, D W Acad-Med. 2002 September; 77(9): 876-81 1040-2446
- **The use of alternative medicine in the treatment of hepatitis C.**
Author(s): Rogers Memorial Hospital, Oconomowac, WI, USA. pambean@charter.net
Source: Bean, P Am-Clin-Lab. 2002 May; 21(4): 19-21 1041-3235
- **The use of complementary/alternative medicine by cancer patients in a New Zealand regional cancer treatment centre.**
Author(s): Guy's Hospital, London, United Kingdom.
Source: Chrystal, K Allan, S Forgeson, G Isaacs, R N-Z-Med-J. 2003 January 24; 116(1168): U296 1175-8716

- **The White House Commission on Complementary and Alternative Medicine Policy: Flexner Report II?**
Source: Brekke, M *Beginnings*. 2001 May-June; 21(3): 7 1071-2984
- **UK: the current state of regulation of complementary and alternative medicine.**
Author(s): Department of Primary Health Care and General Practice, Imperial College School of Medicine, London, UK. l.walker@ic.ac.uk
Source: Walker, L A Budd, S *Complement-Ther-Med*. 2002 March; 10(1): 8-13 0965-2299
- **Unique place of Kampo (Japanese traditional medicine) in complementary and alternative medicine: a survey of doctors belonging to the regional medical association in Japan.**
Author(s): Department of Microbiology, Kyoto Prefectural University of Medicine, Japan.
Source: Watanabe, S Imanishi, J Satoh, M Ozasa, K *Tohoku-J-Exp-Med*. 2001 May; 194(1): 55-63 0040-8727
- **Update on the Complementary and Alternative Medicine (CAM) Task Force. Kentucky Nurses Association for the Legislative Task Force on Complementary and Alternative Medicine.**
Source: Basham, K *Ky-Nurse*. 1999 Oct-December; 47(4): 33 0742-8367
- **Use of alternative medicine by patients in a rural family practice clinic.**
Author(s): Department of Family Medicine, Guthrie Clinic, Sayre, PA, USA. wdelmundo@yahoo.com
Source: del Mundo, Winfred F B Shepherd, William C Marose, Thomas D *Fam-Med*. 2002 Mar; 34(3): 206-12 0742-3225
- **Use of complimentary and alternative medicine by breast cancer patients: prevalence, patterns and communication with physicians.**
Author(s): Department of Medical Biostatistics, 27 Hills Building, University of Vermont, Burlington, VT 05405, USA. tashikag@zoo.uvm.edu
Source: Ashikaga, T Bosompra, K O'Brien, P Nelson, L *Support-Care-Cancer*. 2002 October; 10(7): 542-8 0941-4355
- **Utilization of complementary and alternative medicine by United States adults: results from the 1999 national health interview survey.**
Author(s): Division of Health Interview Statistics, National Center for Health Statistics, Center for Disease Control, 6525 Belcrest Road, Hyattsville, MD 20782, USA.
Source: Ni, Hanyu Simile, Catherine Hardy, Ann M *Med-Care*. 2002 April; 40(4): 353-8 0025-7079
- **What accounts for the appeal of complementary/alternative medicine, and what makes complementary/ alternative medicine "alternative"?**
Author(s): Department of Psychology, University of Western Ontario, London, Canada. lswartzm@uwo.ca
Source: Swartzman, L C Harshman, R A Burkell, J Lundy, M E *Med-Decis-Making*. 2002 Sep-October; 22(5): 431-50 0272-989X

Federal Resources on Nutrition

In addition to the IBIDS, the United States Department of Health and Human Services (HHS) and the United States Department of Agriculture (USDA) provide many sources of information on general nutrition and health. Recommended resources include:

- healthfinder®, HHS's gateway to health information, including diet and nutrition: <http://www.healthfinder.gov/scripts/SearchContext.asp?topic=238&page=0>
- The United States Department of Agriculture's Web site dedicated to nutrition information: www.nutrition.gov
- The Food and Drug Administration's Web site for federal food safety information: www.foodsafety.gov
- The National Action Plan on Overweight and Obesity sponsored by the United States Surgeon General: <http://www.surgeongeneral.gov/topics/obesity/>
- The Center for Food Safety and Applied Nutrition has an Internet site sponsored by the Food and Drug Administration and the Department of Health and Human Services: <http://vm.cfsan.fda.gov/>
- Center for Nutrition Policy and Promotion sponsored by the United States Department of Agriculture: <http://www.usda.gov/cnpp/>
- Food and Nutrition Information Center, National Agricultural Library sponsored by the United States Department of Agriculture: <http://www.nal.usda.gov/fnic/>
- Food and Nutrition Service sponsored by the United States Department of Agriculture: <http://www.fns.usda.gov/fns/>

Additional Web Resources

A number of additional Web sites offer encyclopedic information covering food and nutrition. The following is a representative sample:

- AOL: <http://search.aol.com/cat.adp?id=174&layer=&from=subcats>
- Family Village: http://www.familyvillage.wisc.edu/med_nutrition.html
- Google: <http://directory.google.com/Top/Health/Nutrition/>
- Healthnotes: <http://www.healthnotes.com/>
- Open Directory Project: <http://dmoz.org/Health/Nutrition/>
- Yahoo.com: <http://dir.yahoo.com/Health/Nutrition/>
- WebMD® Health: <http://my.webmd.com/nutrition>
- WholeHealthMD.com: <http://www.wholehealthmd.com/reflib/0,1529,,00.html>

The following is a specific Web list relating to alternative medicine; please note that any particular subject below may indicate either a therapeutic use, or a contraindication (potential danger), and does not reflect an official recommendation (some Web sites are subscription based):

- **Minerals**

- **Betaine Hydrochloride**

- Source: Prima Communications, Inc. www.personalhealthzone.com

- **Chondroitin**

- Alternative names: chondroitin sulfate, sodium chondroitin sulfate

- Source: Integrative Medicine Communications; www.drkoop.com

- **Chromium**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Magnesium**

- Source: Prima Communications, Inc. www.personalhealthzone.com

- **Sulfur**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Zinc**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Food and Diet**

- **Cartilage**

- Alternative names: Shark Cartilage

- Source: Integrative Medicine Communications; www.drkoop.com

- **Homeopathic Remedies for Athletic Performance**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Hypertension**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Low Back Pain**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Low-Allergen Diet**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Tendinitis**

- Source: Healthnotes, Inc. www.healthnotes.com

CHAPTER 3. ALTERNATIVE MEDICINE AND ALTERNATIVE MEDICINE

Overview

In this chapter, we will begin by introducing you to official information sources on complementary and alternative medicine (CAM) relating to alternative medicine. At the conclusion of this chapter, we will provide additional sources.

The Combined Health Information Database

The Combined Health Information Database (CHID) is a bibliographic database produced by health-related agencies of the U.S. federal government (mostly from the National Institutes of Health) that can offer concise information for a targeted search. The CHID database is updated four times a year at the end of January, April, July, and October. Check the titles, summaries, and availability of CAM-related information by using the “Simple Search” option at the following Web site: <http://chid.nih.gov/simple/simple.html>. In the drop box at the top, select “Complementary and Alternative Medicine.” Then type “alternative medicine” (or synonyms) in the second search box. We recommend that you select 100 “documents per page” and to check the “whole records” options. The following was extracted using this technique:

- **Dietary Supplements, Complementary or Alternative Medicines**

Source: Bethesda, MD: National Library of Medicine. 2002. 4 p.

Contact: Available from National Library of Medicine. National Institutes of Health, 8600 Rockville Pike, Bethesda, MD 20894. (888) 346-3656; INTERNATIONAL: (301) 594-5983; E-MAIL: custserv@nlm.nih.gov. PRICE: Free.

Summary: This Web page provides information about where consumers can find information about taking natural products, dietary supplements, medicinal plants, or other complementary or alternative medicines. It provides Web addresses that contain federally funded information, searchable databases, and information from other organizations. It also informs consumers about how they can obtain further assistance in searching for information on dietary supplements.

- **Complementary and Alternative Medicine: A Primer**

Source: *Family Practice Management*. 8(3): 37-42. March 2001.

Summary: This journal article is designed to provide family physicians with basic knowledge about complementary and alternative medicine (CAM) so they can offer appropriate guidance to their patients. First, it summarizes background information about acupuncture, chiropractic, herbal medicine, homeopathy, and naturopathy. Then, it suggests the following strategies to get patients to talk openly about their CAM use: (1) ask the question; (2) avoid using the words 'alternative therapy,' at least initially; (3) don't dismiss any therapy as placebo; (4) discuss providers as well as therapies; and (5) discuss CAM therapies with patients at every visit. The article includes sample answers to patient questions about CAM, a list of resources for additional information, and 9 references.

- **Report: 'Can Alternative Medicine Be Integrated into Mainstream Care?'**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2001. 12 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D025.

Summary: This report discusses the National Center for Complementary and Alternative Medicine (NCCAM)/ Royal College of Physicians-sponsored conference in London, England, on January 23-24, 2001, titled 'Can Alternative Medicine Be Integrated into Mainstream Care?' Lead investigators and spokespersons for integrative medicine, medical education, and research in the United States, as well as Stephen E. Straus, M.D., Director of NCCAM, and Richard Nahin, Ph.D., Director of NCCAM's Division of Extramural Research, Training, and Review, met with their counterparts in the United Kingdom (U.K.). The report reviews the goals of the conference, including the sharing of knowledge on research and development in complementary and alternative medicine (CAM); approaches to the integration of CAM and conventional medicine; and the American and British governments' interest and participation in the field so far. The report also discusses the United States' and United Kingdom's perceptions of CAM, conventional medical education and CAM, CAM regulation and certification, interdisciplinary approaches to delivering care, and issues of clinical evidence. 1 Table.

- **Legal Status of Traditional Medicine and Complementary/Alternative Medicine: A Worldwide Review**

Source: Geneva, Switzerland: World Health Organization. 2001. 189 p.

Contact: World Health Organization Headquarters. Avenue Appia 20, 1211 Geneva 27, Switzerland. Telephone: (+00 41 22) 791 21 11; Fax: (+00 41 22) 791 3111; E-mail: publications@who.int. PRICE: Free.

Summary: This World Health Organization (WHO) document provides information on the legal status of traditional and complementary/alternative medicine in 123 countries, including those from the Americas, Europe, Southeast Asia, Western Pacific, Eastern Mediterranean, and Africa. The purpose of the document is to facilitate the development of legal frameworks and the sharing of experiences between countries by introducing what some countries have done in terms of regulating traditional and complementary/alternative medicine. It provides summaries of the policies enacted in

the different countries and the variety of models of integration adopted by national policymakers. This document serves as an update and an expansion of the 1998 WHO document, "Regulatory Situation of Herbal Medicines: A Worldwide Review." 283 references.

- **Report of the Task Force on Complementary and Alternative Medicine**

Source: Frankfort, KY: Task Force on Complementary and Alternative Medicine. January 2000. 64 p.

Contact: Available from Legislative Research Commission. 700 Capital Avenue, Frankfort, KY 40601. (502) 564-8100; FAX: (502) 223-5094. PRICE: Free.

Summary: This January 2000 report of the Task Force on Complementary and Alternative Medicine describes the work of the Task Force during its 13 meetings to study the effects of complementary and alternative medicine (CAM), nonconventional medical treatment, acupuncture, and naturopathy. It is divided into six sections. Section 1 provides background information on CAM. Section 2 details the laws affecting the practice of CAM. Section 3 reviews the efficacy of CAM practices. Section 4 gives information on public protection. Section 5 focuses on the integration of CAM with traditional practices. Section 6 addresses the increasing demand placed on the medical community for the use of alternative practitioners. 7 references.

- **Complementary and Alternative Medicine Resources at NCI-Designated Cancer Centers: Survey Results**

Source: Bethesda, MD: National Cancer Institute. 1999. 7 p.

Contact: Available from National Cancer Institute. Publications Ordering Service, P.O. Box 24128, Baltimore, MD 21227. (800) 4-CANCER or (800) 422-6237; TTY: (800) 332-8615; FAX: (301) 330-7968. PRICE: Free.

Summary: This document provides the results of a February 1999 survey on how the National Cancer Institute's (NCI) Cancer Patient Education Network representatives respond to patients' questions about complementary and alternative medicine (CAM). The document summarizes the survey methodology, the results of the survey, and recommendations for developing strategies to promote and provide more effective CAM information to cancer patients and their family members. The document lists the survey questions and responses and provides a list of survey participants.

- **Alternative Medicine Handbook: The Complete Reference Guide to Alternative and Complementary Therapies**

Source: New York, NY: W.W. Norton. 1998. 340 p.

Contact: Available from W.W. Norton and Company, Inc. 500 Fifth Avenue, New York, NY 10110. (212) 354-5500; FAX: 212-869-0856. PRICE: \$25.00. ISBN: 0393045668.

Summary: This book describes 53 major alternative and complementary medicine practices. It does not recommend treatments, but instead provides information about their backgrounds, goals, benefits, and risks to help the reader make informed choices. It is divided into seven sections addressing different categories of alternative and complementary treatments: (1) traditional healing methods, which typically are ancient approaches that offer remedies in the context of spiritual or lifestyle guidance; (2) dietary and herbal remedies; (3) methods that involve active use of the mind to heal the body; (4) biologic therapies involving unproven pharmacologic and other types of

medication; (5) bodywork, involving manipulation of muscles and bones; (6) use of the senses to enhance well-being; and (7) the application of external energies to restore health. Each section contains several chapters, each of which include a brief introduction, a description of the alternative or complementary therapy, and information about the claims of practitioners, theories or beliefs upon which the therapy is based, available research, potential benefits, and where to find additional information. This book contains a list of complementary therapies for common ailments, a glossary, a list of professional degrees and titles, and an index.

- **Careers in Alternative Medicine**

Source: New York, NY: Rosen Publishing Group, Inc. 1997. 189 p.

Contact: Rosen Publishing Group, Inc. 29 East 21st Street, New York, NY 10010. 212-777-3017. FAX: 212-777-0277. Roseno@erols.com. PRICE: Call for price information. ISBN: 0823924327.

Summary: This book is designed to help people learn about career options in alternative medicine. The first part provides background information about the field of alternative medicine, ways of thinking about health and healing, and the role of the alternative practitioner. The second part is a guide to the options in alternative health care. One chapter describes the primary types of alternative therapies, including body-oriented therapies, kinesthetic (movement) therapies, and internal therapies. It discusses the basic principles of each therapy, requirements, schools, potential earnings, and sources of additional information. Another chapter describes therapies that either are new and developing or used as supplements to the primary modalities. The last chapter in this part offers guidelines to help readers choose a field and a school that is right for them. The third part suggests ways of preparing for a career in alternative medicine, learning more about the field, and becoming a professional. The book includes a glossary, a list of alternative therapy schools, a list of suggested readings, and an index.

- **Alternative Medicine Online: A Guide to Natural Remedies on the Internet**

Source: Blue Ridge Summit, PA: National Book Network. 1997. 216 p.

Contact: Available from National Book Network. P.O. Box 190, Blue Ridge Summit, PA 17214. (800) 462-6420. PRICE: \$12.95. ISBN: 1881025101.

Summary: This book is a guide to alternative medicine on the Internet. The author describes more than 50 world-wide web sites that contain information about alternative medicine. The book details useful and sometimes offbeat sites on-line. Chapters are organized alphabetically by topics including acupuncture, apitherapy, Eye Movement Desensitizing and Reprocessing (EMDR), gemstones, Richard Evans, M.D. osteopathy, Ontario guide; Sunsite; Wound Care Institute; and Andrew Weil. Each section contains the web site title, address, information, and the author's opinion about whether or not it is helpful. The book contains an index to topics and graphics of the actual web site.

- **Defining and Describing Complementary and Alternative Medicine**

Source: *Alternative Therapies in Health and Medicine*. 3(2): 49-57. March 1997.

Summary: This journal article describes the findings of a panel on definition and description of complementary and alternative medicine (CAM) at the Office of Alternative Medicine (OAM) CAM Research Methodology Conference in April, 1995. It states that the definition of CAM has been debated in recent years as this type of therapy has increasingly become a focus of public and academic attention. Individual authors

typically have stipulated a definition for purposes of their particular articles, and definitions have varied with perspectives and affiliations of the authors. The panel proposed a definition of the field of CAM for use by the OAM in setting its research jurisdiction. Additionally, the panel suggested a set of descriptive parameters for qualitative research on CAM and a minimum descriptive standard for both qualitative and quantitative research in the field. This journal article contains 2 tables and 14 references. (AA-M).

- **Scientific Plan for the Evaluation of Alternative Medicine in the Treatment of HIV-AIDS**

Source: *Alternative Therapies in Health and Medicine*. 3(2): 58-67. March 1997.

Summary: This journal article describes a scientific plan for the evaluation of alternative medicine in the treatment of HIV-AIDS. The Bastyr University AIDS Research Center, supported by an Office of Alternative Medicine grant, will conduct the study. The plan is to determine whether patients who use both conventional and alternative medicine have different outcomes from patients who only use conventional medicine. The plan calls for comparison of the occurrence of AIDS-related opportunistic infections and neoplasms in HIV-positive patients who are using specific alternative therapies with those who use other medical treatments. The study will consist of 1,500 HIV-positive patients 18 years or older who use alternative medicine. The sample includes patients at all stages of HIV infection and/or AIDS, and with any CD4 lymphocyte count. Analysis will focus on six dependent variables: survival, progression, absolute CD4 lymphocyte counts, weight, quality of life, and HIV RNA viral load. This journal article contains 5 tables and 5 references.

- **Alternative Medicine Update**

Source: *Alternative Health Practitioner*. 3(3): 157-160. Fall/Winter 1997.

Summary: This journal article reports the results of 12 studies funded by the Office of Alternative Medicine in 1993 and 1994. The studies were classified as either mind/body interventions or as pharmacological or biological treatments. The 10 mind/body intervention studies include the following therapies: biofeedback, dance movement therapy, guided imagery, hypnotic imagery, music therapy, prayer, and yoga. Conditions studied include pain, diabetes mellitus, cystic fibrosis, asthma, immunity, cancer, AIDS, brain injury, and drug abuse. The two pharmacological and biological studies were 'Enzyme Therapy and Experimental Memory Metastasis' and 'Pharmacological Treatment of Cancer by Antioxidants.'

- **Alternative Medicine: Expanding Medical Horizons. A Report to the National Institutes of Health on Alternative Medical Systems and Practices in the United States**

Source: Washington, DC: Government Printing Office. 1994. 372 p.

Contact: Available from U.S. Government Printing Office. Superintendent of Documents, PO Box 371954, Pittsburgh, PA 15250-7954. (202) 512-1800; FAX: (202) 512-2250. PRICE: \$25.00. ISBN: 0160454794.

Summary: This document was developed from a 1992 National Institutes of Health workshop and includes input from more than 200 practitioners and researchers of alternative medicine from throughout the United States. Part I of the report examines seven fields of alternative medicine: mind-body interventions, bioelectromagnetics

applications in medicine, alternative systems of medical practice, manual healing methods, pharmacological and biological treatments, herbal medicine, and diet and nutrition in the prevention and treatment of chronic disease. Part II addresses a number of cross-cutting issues relevant to all seven fields, including research infrastructure, research databases, research methodologies, the peer review process, and public information activities. Each chapter in this report includes major recommendations and references. A glossary and index are found at the back of the report. Numerous references.

- **Guidelines on Basic Training and Safety in Acupuncture**

Source: Geneva, Switzerland: World Health Organization. 2001. 31 p.

Contact: World Health Organization Headquarters. Avenue Appia 20, 1211 Geneva 27, Switzerland. Telephone: (+00 41 22) 791 21 11; Fax: (+00 41 22) 791 3111; E-mail: publications@who.int. PRICE: Free.

Summary: This World Health Organization (WHO) document provides guidelines on basic training and safety in acupuncture. The basic training guidelines cover basic requirements for training non-physician acupuncturists and physicians wishing to use acupuncture in their clinical work, and include a core syllabus. They are intended to assist national health authorities in setting standards and establishing official examinations, and also medical schools and institutions wishing to arrange training programs. The safety guidelines are meant for hospitals, clinics, and practitioners; and provide standards for safety in the clinical practice of acupuncture. Their purpose is to minimize the risk of infection and accidents, to alert acupuncturists to contraindications, and to advise on the management of complications occurring during treatment. 1 appendix. 1 annex.

- **Acupuncture: A Review of Its History, Theories, and Indications**

Source: Southern Medical Journal. 91(12): 1121-1125. December 1998.

Summary: This journal article reviews the literature on the history, techniques, physiology, indications, adverse effects, and limitations of acupuncture. It describes six approaches to acupuncture that commonly are used in the United States: traditional Chinese medicine acupuncture, French energetics, Korean hand acupuncture, five element theory, auricular acupuncture, and myofascially-based acupuncture. It reviews neurophysiologic theories of the action of acupuncture; methodological difficulties in acupuncture research; and studies supporting the efficacy of acupuncture as a treatment for various pain syndromes, nausea, asthma, addiction, and stroke. It also identifies some of the adverse effects related to acupuncture which have been reported, and highlights studies suggesting that acupuncture may have only limited use. Finally, one of the authors describes his own personal and clinical experience with acupuncture. The article has 43 references.

- **Acceptance of Some Acupuncture Applications**

Source: JAMA. Journal of the American Medical Association. 278(21): 1725-1727. December 3, 1997.

Summary: This journal article summarizes the findings of the National Institutes of Health consensus panel on acupuncture. After evaluating current evidence for the efficacy of acupuncture, the 12-member panel concluded that there is clear evidence of efficacy in the control of postoperative nausea and vomiting, nausea and vomiting

associated with chemotherapy and postoperative dental pain, and probably for nausea in early pregnancy. The panelists also found that the use of acupuncture, by itself or as an adjunct therapy, results in satisfactory treatment for a number of other conditions, although firm evidence of efficacy has not yet been established. The panelists concluded that more research is needed linking the use of acupuncture to physiological changes known to be associated with pain relief, and that more attention should be given to the issues involved in expanding the use of acupuncture into the health care system. In addition, the panelists noted that acupuncture has fewer side effects than many of the drugs or accepted medical procedures used for the same conditions. Finally, the panelists commended the progress the acupuncture educational community has made in establishing training and credentialing programs.

- **Acupuncture: NIH Consensus Statement**

Source: Kensington, MD: NIH Consensus Program Information Center. November 1997. 39 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D030.

Summary: This consensus statement provides health care providers, patients, and the general public with a responsible assessment of the use and effectiveness of acupuncture for a variety of conditions. After the introduction, the report answers five major research questions: (1) What is the efficacy of acupuncture, compared with placebo or sham acupuncture, in the conditions for which sufficient data are available to evaluate? (2) What is the place of acupuncture in the treatment of various conditions for which sufficient data are available, in comparison or in combination with other interventions (including no intervention)? (3) What is known about the biological effects of acupuncture that helps us understand how it works? (4) What issues need to be addressed so that acupuncture can be appropriately incorporated into today's health care system? and (5) What are the directions for future research? The report includes a summary of conclusions drawn at the conference and a list of experts who served as members of the consensus development panel. 67 references.

National Center for Complementary and Alternative Medicine

The National Center for Complementary and Alternative Medicine (NCCAM) of the National Institutes of Health (<http://nccam.nih.gov/>) has created a link to the National Library of Medicine's databases to facilitate research for articles that specifically relate to alternative medicine and complementary medicine. To search the database, go to the following Web site: <http://www.nlm.nih.gov/nccam/camonpubmed.html>. Select "CAM on PubMed." Enter "alternative medicine" (or synonyms) into the search box. Click "Go." The following references provide information on particular aspects of complementary and alternative medicine that are related to alternative medicine:

- **Acupuncture ameliorates symptoms in men with chronic prostatitis/chronic pelvic pain syndrome.**

Author(s): Chen R, Nickel JC.

Source: *Urology*. 2003 June; 61(6): 1156-9; Discussion 1159.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12809886&dopt=Abstract

- **Acupuncture and spinal cord medicine.**
Author(s): Paola FA, Arnold M.
Source: *J Spinal Cord Med*. 2003 Spring; 26(1): 12-20. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12830963&dopt=Abstract
- **Acupuncture as a promising treatment for below-level central neuropathic pain: a retrospective study.**
Author(s): Rapson LM, Wells N, Pepper J, Majid N, Boon H.
Source: *J Spinal Cord Med*. 2003 Spring; 26(1): 21-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12830964&dopt=Abstract
- **Acupuncture in clinical neurology.**
Author(s): Rabinstein AA, Shulman LM.
Source: *The Neurologist*. 2003 May; 9(3): 137-48. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12808410&dopt=Abstract
- **Alternative medicine and male reproduction.**
Author(s): Niederberger C.
Source: *Journal of Andrology*. 2003 September-October; 24(5): 649.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12954652&dopt=Abstract
- **Alternative medicines and the liver.**
Author(s): Fogden E, Neuberger J.
Source: *Liver International : Official Journal of the International Association for the Study of the Liver*. 2003 August; 23(4): 213-20.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12895259&dopt=Abstract
- **Association of complementary and alternative medicine use, demographic factors, and perimenopausal symptoms in a multiethnic sample of women: the ENDOW study.**
Author(s): Cherrington A, Lewis CE, McCreath HE, Herman CJ, Richter DL, Byrd T; ENDOW Study.
Source: *Family & Community Health*. 2003 January-March; 26(1): 74-83.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12802130&dopt=Abstract
- **Botulinum toxin: application into acupuncture points for migraine.**
Author(s): Tamura BM, Chang B.

Source: *Dermatologic Surgery* : Official Publication for American Society for Dermatologic Surgery [et Al.]. 2003 July; 29(7): 749-54.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12828700&dopt=Abstract

- **Characteristics and quality of systematic reviews of acupuncture, herbal medicines, and homeopathy.**
 Author(s): Linde K, ter Riet G, Hondras M, Melchart D, Willich SN.
 Source: *Forschende Komplementarmedizin Und Klassische Naturheilkunde = Research in Complementary and Natural Classical Medicine*. 2003 April; 10(2): 88-94.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12808368&dopt=Abstract
- **Comment on: Does use of alternative medicine predict survival from cancer? Eur J Cancer 2003, 39, 372-377.**
 Author(s): Hamre HJ, Kienle GS, Kiene H.
 Source: *European Journal of Cancer (Oxford, England : 1990)*. 2003 July; 39(11): 1642; Author Reply 1643.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12855273&dopt=Abstract
- **Complementary and alternative medicine (CAM) use among elderly Australian women who have cancer.**
 Author(s): Sibbritt D, Adams J, Easthope G, Young A.
 Source: *Supportive Care in Cancer : Official Journal of the Multinational Association of Supportive Care in Cancer*. 2003 August; 11(8): 548-50. Epub 2003 July 10.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12856200&dopt=Abstract
- **Complementary and alternative medicine cultures.**
 Author(s): Bielory L.
 Source: *Annals of Allergy, Asthma & Immunology : Official Publication of the American College of Allergy, Asthma, & Immunology*. 2003 June; 90(6): 581-2.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12839313&dopt=Abstract
- **Complementary and alternative medicine in Canada: what is the future?**
 Author(s): Saunders PR.
 Source: *Healthc Pap*. 2003; 3(5): 43-9; Discussion 72-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811076&dopt=Abstract
- **Complementary and alternative medicine in cancer.**
 Author(s): Moliver N.
 Source: *Annals of Internal Medicine*. 2003 July 15; 139(2): 152; Author Reply 152.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12859167&dopt=Abstract
- **Complementary and alternative medicine in children with asthma.**
 Author(s): Orhan F, Sekerel BE, Kocabas CN, Sackesen C, Adalioglu G, Tuncer A.

Source: *Annals of Allergy, Asthma & Immunology* : Official Publication of the American College of Allergy, Asthma, & Immunology. 2003 June; 90(6): 611-5.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12839318&dopt=Abstract

- **Complementary and alternative medicine in fibromyalgia and related syndromes.**
Author(s): Holdcraft LC, Assefi N, Buchwald D.
Source: *Best Practice & Research. Clinical Rheumatology*. 2003 August; 17(4): 667-83.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12849718&dopt=Abstract
- **Complementary and alternative medicine in mainstream public health: a role for research in fostering integration.**
Author(s): Giordano J, Garcia MK, Boatwright D, Klein K.
Source: *Journal of Alternative and Complementary Medicine (New York, N.Y.)*. 2003 June; 9(3): 441-5.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12816632&dopt=Abstract
- **Complementary and alternative medicine use among patients attending a hospital dermatology clinic in Taiwan.**
Author(s): Chen YF, Chang JS.
Source: *International Journal of Dermatology*. 2003 August; 42(8): 616-21.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12890105&dopt=Abstract
- **Complementary and alternative medicine use by Canadian patients with inflammatory bowel disease: results from a national survey.**
Author(s): Hilsden RJ, Verhoef MJ, Best A, Pocobelli G.
Source: *The American Journal of Gastroenterology*. 2003 July; 98(7): 1563-8.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12873578&dopt=Abstract
- **Complementary and alternative medicine: a pharmacist's perspective on patient needs.**
Author(s): Kalaria D.
Source: *Healthc Pap*. 2003; 3(5): 67-70; Discussion 72-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811080&dopt=Abstract
- **Complementary and alternative medicine: an integrated approach required.**
Author(s): Ruedy J.
Source: *Healthc Pap*. 2003; 3(5): 50-5; Discussion 72-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811077&dopt=Abstract
- **Complementary and alternative medicine: how do we know if it works?**
Author(s): Kelner M, Snider B, Wellman P.

Source: Healthc Pap. 2003; 3(5): 10-28.

http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811073&dopt=Abstract

- **Complementary and alternative medicine: how do we know if it works? Time to find out!**
Author(s): Rieder MJ, Matsui D.
Source: Healthc Pap. 2003; 3(5): 62-6; Discussion 72-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811079&dopt=Abstract
- **Complementary and alternative medicine: socially constructed or evidence-based?**
Author(s): Richardson J.
Source: Healthc Pap. 2003; 3(5): 30-6; Discussion 72-7.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811074&dopt=Abstract
- **Complementary and alternative medicine: the next generation of health promotion?**
Author(s): Hill FJ.
Source: Health Promot Internation. 2003 September; 18(3): 265-72.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12920147&dopt=Abstract
- **Complementary/alternative medicine in gynecology: no simple messages please!**
Author(s): Ernst EE.
Source: Acta Obstetrica Et Gynecologica Scandinavica. 2003 April; 82(4): 391-2.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12803180&dopt=Abstract
- **Effects of corticosteroid and electroacupuncture on experimental spinal cord injury in dogs.**
Author(s): Yang JW, Jeong SM, Seo KM, Nam TC.
Source: J Vet Sci. 2003 April; 4(1): 97-101.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12819372&dopt=Abstract
- **Electroacupuncture and moxibustion for correction of abomasal displacement in dairy cattle.**
Author(s): Jang KH, Lee JM, Nam TC.
Source: J Vet Sci. 2003 April; 4(1): 93-5.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12819371&dopt=Abstract
- **'Electro-acupuncture in a child with mild spastic hemiplegic cerebral palsy'.**
Author(s): Svedberg L, Nordahl G, Lundeberg T.
Source: Developmental Medicine and Child Neurology. 2003 July; 45(7): 503-4.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12828407&dopt=Abstract

- **Ethnic minority use of complementary and alternative medicine (CAM): a national probability survey of CAM utilizers.**
Author(s): Mackenzie ER, Taylor L, Bloom BS, Hufford DJ, Johnson JC.
Source: *Alternative Therapies in Health and Medicine*. 2003 July-August; 9(4): 50-6.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12868252&dopt=Abstract
- **Hepatotoxicity and complementary and alternative medicines.**
Author(s): Schiano TD.
Source: *Clinics in Liver Disease*. 2003 May; 7(2): 453-73. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12879994&dopt=Abstract
- **Information-seeking behavior in complementary and alternative medicine (CAM): an online survey of faculty at a health sciences campus.**
Author(s): Owen DJ, Fang ML.
Source: *Journal of the Medical Library Association : Jmla*. 2003 July; 91(3): 311-21.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12883563&dopt=Abstract
- **Medical students' attitudes about complementary and alternative medicine.**
Author(s): Furnham A, McGill C.
Source: *Journal of Alternative and Complementary Medicine (New York, N.Y.)*. 2003 April; 9(2): 275-84.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12804081&dopt=Abstract
- **Mobility limitations and complementary and alternative medicine: are people with disabilities more likely to pray?**
Author(s): Hendershot GE.
Source: *American Journal of Public Health*. 2003 July; 93(7): 1079-80.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12835186&dopt=Abstract
- **Non-pharmacological approaches to chronic headaches: transcutaneous electrical nerve stimulation, lasertherapy and acupuncture in transformed migraine treatment.**
Author(s): Allais G, De Lorenzo C, Quirico PE, Lupi G, Airola G, Mana O, Benedetto C.
Source: *Neurological Sciences : Official Journal of the Italian Neurological Society and of the Italian Society of Clinical Neurophysiology*. 2003 May; 24 Suppl 2: S138-42.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811613&dopt=Abstract
- **Prevalence and pattern of use of complementary and alternative medicine (CAM) in hypertensive patients of a tertiary care center in India.**
Author(s): Shafiq N, Gupta M, Kumari S, Pandhi P.
Source: *Int J Clin Pharmacol Ther*. 2003 July; 41(7): 294-8.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12875345&dopt=Abstract

- **Prevalence study of concurrent use of complementary and alternative medicine in patients attending primary care services in Scotland.**
 Author(s): Featherstone C, Godden D, Gault C, Emslie M, Took-Zozaya M.
 Source: American Journal of Public Health. 2003 July; 93(7): 1080-2.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12835187&dopt=Abstract
- **Side-effects of complementary and alternative medicine.**
 Author(s): Niggemann B, Gruber C.
 Source: Allergy. 2003 August; 58(8): 707-16.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12859546&dopt=Abstract
- **Teaching medical students complementary and alternative medicine using evidence-based principles.**
 Author(s): Forjuoh SN, Rascoe TG, Symm B, Edwards JC.
 Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2003 June; 9(3): 429-39.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12816631&dopt=Abstract
- **The evidence base for complementary and alternative medicine: methods of Evidence Mapping with application to CAM.**
 Author(s): Katz DL, Williams AL, Girard C, Goodman J, Comerford B, Behrman A, Bracken MB.
 Source: Alternative Therapies in Health and Medicine. 2003 July-August; 9(4): 22-30. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12868249&dopt=Abstract
- **The use of complementary and alternative medicine therapies in type 2 diabetic patients in Mexico.**
 Author(s): Argaez-Lopez N, Wachter NH, Kumate-Rodriguez J, Cruz M, Talavera J, Rivera-Arce E, Lozoya X; DIMSS Study Group.
 Source: Diabetes Care. 2003 August; 26(8): 2470-1.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12882883&dopt=Abstract
- **Understanding the transition from alternative medicine to mainstream science: the homocysteine theory of heart disease and the crucial role of effective mentoring.**
 Author(s): Podell RN.
 Source: Medical Hypotheses. 2003 September; 61(3): 340-5.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12944102&dopt=Abstract
- **Unregulated alternative medicine.**
 Author(s): Bircher AJ, Surber C.

Source: J Drugs Dermatol. 2003 January; 2(1): 58-61. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12852383&dopt=Abstract

- **Use of alternative medicine by patients with cancer in a rural area of Switzerland.**
Author(s): van der Weg F, Streuli RA.
Source: Swiss Medical Weekly : Official Journal of the Swiss Society of Infectious Diseases, the Swiss Society of Internal Medicine, the Swiss Society of Pneumology. 2003 April 19; 133(15-16): 233-40.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12811673&dopt=Abstract
- **Use of and attitudes toward complementary and alternative medicine among family practice patients in small rural Illinois communities.**
Author(s): Herron M, Glasser M.
Source: The Journal of Rural Health : Official Journal of the American Rural Health Association and the National Rural Health Care Association. 2003 Summer; 19(3): 279-84.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12839136&dopt=Abstract
- **What is complementary and alternative medicine?**
Author(s): Diehl DL.
Source: Journal of the American Medical Directors Association. 2000 March-April; 1(2): 88-92.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12818038&dopt=Abstract
- **Whole systems research: a discipline for studying complementary and alternative medicine.**
Author(s): Ritenbaugh C, Verhoef M, Fleishman S, Boon H, Leis A.
Source: Alternative Therapies in Health and Medicine. 2003 July-August; 9(4): 32-6. Review.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12868250&dopt=Abstract
- **Willingness to participate in complementary and alternative medicine clinical trials among patients with craniofacial disorders.**
Author(s): Schneider J, Vuckovic N, DeBar L.
Source: Journal of Alternative and Complementary Medicine (New York, N.Y.). 2003 June; 9(3): 389-401.
http://www.ncbi.nlm.nih.gov:80/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=12816627&dopt=Abstract

Additional Web Resources

A number of additional Web sites offer encyclopedic information covering CAM and related topics. The following is a representative sample:

- Alternative Medicine Foundation, Inc.: <http://www.herbmed.org/>

- AOL: <http://search.aol.com/cat.adp?id=169&layer=&from=subcats>
- Chinese Medicine: <http://www.newcenturynutrition.com/>
- drkoop.com[®]: <http://www.drkoop.com/InteractiveMedicine/IndexC.html>
- Family Village: http://www.familyvillage.wisc.edu/med_altn.htm
- Google: <http://directory.google.com/Top/Health/Alternative/>
- Healthnotes: <http://www.healthnotes.com/>
- MedWebPlus:
http://medwebplus.com/subject/Alternative_and_Complementary_Medicine
- Open Directory Project: <http://dmoz.org/Health/Alternative/>
- HealthGate: <http://www.tnp.com/>
- WebMD[®]Health: http://my.webmd.com/drugs_and_herbs
- WholeHealthMD.com: <http://www.wholehealthmd.com/reflib/0,1529,,00.html>
- Yahoo.com: http://dir.yahoo.com/Health/Alternative_Medicine/

The following is a specific Web list relating to alternative medicine; please note that any particular subject below may indicate either a therapeutic use, or a contraindication (potential danger), and does not reflect an official recommendation (some Web sites are subscription based):

- **General Overview**

- **Abdominal Wall Inflammation**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Acne**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Acne Vulgaris**

- Source: Healthnotes, Inc. www.healthnotes.com

- **AIDS and HIV**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Alcoholism**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Allergic Rhinitis**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Allergies and Sensitivities**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Alzheimer's Disease**

- Source: Integrative Medicine Communications; www.drkoop.com

Amenorrhea

Source: Healthnotes, Inc. www.healthnotes.com

Amenorrhea

Source: Integrative Medicine Communications; www.drkoop.com

Anaphylaxis

Source: Integrative Medicine Communications; www.drkoop.com

Angina

Source: Healthnotes, Inc. www.healthnotes.com

Angina

Source: Integrative Medicine Communications; www.drkoop.com

Angioedema

Source: Integrative Medicine Communications; www.drkoop.com

Anxiety

Source: Healthnotes, Inc. www.healthnotes.com

Anxiety

Source: Integrative Medicine Communications; www.drkoop.com

Appendicitis

Source: Integrative Medicine Communications; www.drkoop.com

Arteriosclerosis

Source: Integrative Medicine Communications; www.drkoop.com

Ascariasis

Source: Integrative Medicine Communications; www.drkoop.com

Asthma

Source: Healthnotes, Inc. www.healthnotes.com

Asthma

Source: Integrative Medicine Communications; www.drkoop.com

Atherosclerosis

Source: Integrative Medicine Communications; www.drkoop.com

Attention Deficit Hyperactivity Disorder

Source: Integrative Medicine Communications; www.drkoop.com

Bell's Palsy

Source: Healthnotes, Inc. www.healthnotes.com

Bone Cancer

Source: Integrative Medicine Communications; www.drkoop.com

Bone Loss

Source: Integrative Medicine Communications; www.drkoop.com

Bone Marrow Disorders

Source: Integrative Medicine Communications; www.drkoop.com

Brain Cancer

Source: Integrative Medicine Communications; www.drkoop.com

Bronchitis

Source: Integrative Medicine Communications; www.drkoop.com

Bruising

Source: Healthnotes, Inc. www.healthnotes.com

Bulimia Nervosa

Source: Integrative Medicine Communications; www.drkoop.com

Burns

Source: Healthnotes, Inc. www.healthnotes.com

Burns

Source: Integrative Medicine Communications; www.drkoop.com

Bursitis

Source: Integrative Medicine Communications; www.drkoop.com

Candida/Yeast Hypersensitivity Syndrome

Source: Prima Communications, Inc. www.personalhealthzone.com

Carpal Tunnel Syndrome

Source: Healthnotes, Inc. www.healthnotes.com

Carpal Tunnel Syndrome

Source: Integrative Medicine Communications; www.drkoop.com

Cellulitis

Source: Integrative Medicine Communications; www.drkoop.com

Chickenpox and Shingles

Source: Integrative Medicine Communications; www.drkoop.com

Chronic Fatigue Syndrome

Source: Integrative Medicine Communications; www.drkoop.com

Chronic Myelogenous Leukemia

Source: Integrative Medicine Communications; www.drkoop.com

Chronic Obstructive Pulmonary Disease

Source: Integrative Medicine Communications; www.drkoop.com

Cirrhosis

Source: Integrative Medicine Communications; www.drkoop.com

Congestive Heart Failure

Source: Integrative Medicine Communications; www.drkoop.com

Conjunctivitis

Source: Integrative Medicine Communications; www.drkoop.com

Constipation

Source: Healthnotes, Inc. www.healthnotes.com

Constipation

Source: Integrative Medicine Communications; www.drkoop.com

Coronary Artery Disease

Source: Integrative Medicine Communications; www.drkoop.com

Cough

Source: Healthnotes, Inc. www.healthnotes.com

Cough, Whooping

Source: Integrative Medicine Communications; www.drkoop.com

Crohn's Disease

Source: Integrative Medicine Communications; www.drkoop.com

Cyclic Mastalgia

Alternative names: Cyclic Mastitis, Fibrocystic Breast Disease
Source: Prima Communications, Inc. www.personalhealthzone.com

Cystic Fibrosis

Source: Integrative Medicine Communications; www.drkoop.com

Depression

Source: Healthnotes, Inc. www.healthnotes.com

Depression

Source: Integrative Medicine Communications; www.drkoop.com

Depression (Mild to Moderate)

Source: Prima Communications, Inc. www.personalhealthzone.com

Dermatitis

Source: Integrative Medicine Communications; www.drkoop.com

Diabetes

Source: Healthnotes, Inc. www.healthnotes.com

Diabetes Mellitus

Source: Integrative Medicine Communications; www.drkoop.com

Diarrhea

Source: Healthnotes, Inc. www.healthnotes.com

Diverticular Disease

Source: Integrative Medicine Communications; www.drkoop.com

Dysmenorrhea

Source: Healthnotes, Inc. www.healthnotes.com

Dysmenorrhea

Source: Integrative Medicine Communications; www.drkoop.com

Ear Infection

Source: Integrative Medicine Communications; www.drkoop.com

Eczema

Source: Integrative Medicine Communications; www.drkoop.com

Edema

Source: Integrative Medicine Communications; www.drkoop.com

Emphysema

Source: Integrative Medicine Communications; www.drkoop.com

Endocarditis

Source: Integrative Medicine Communications; www.drkoop.com

Endometriosis

Source: Healthnotes, Inc. www.healthnotes.com

Endometriosis

Source: Integrative Medicine Communications; www.drkoop.com

Epilepsy

Source: Integrative Medicine Communications; www.drkoop.com

Epstein-Barr Virus

Source: Integrative Medicine Communications; www.drkoop.com

Erectile Dysfunction

Source: Healthnotes, Inc. www.healthnotes.com

Fainting

Source: Integrative Medicine Communications; www.drkoop.com

Female Infertility

Source: Healthnotes, Inc. www.healthnotes.com

Fever of Unknown Origin

Source: Integrative Medicine Communications; www.drkoop.com

Fibromyalgia

Source: Healthnotes, Inc. www.healthnotes.com

Fibromyalgia

Source: Integrative Medicine Communications; www.drkoop.com

Flu

Source: Integrative Medicine Communications; www.drkoop.com

Food Allergy

Source: Integrative Medicine Communications; www.drkoop.com

Food Poisoning

Source: Integrative Medicine Communications; www.drkoop.com

Frostbite

Source: Integrative Medicine Communications; www.drkoop.com

Gallbladder Disease

Source: Integrative Medicine Communications; www.drkoop.com

Gastritis

Source: Integrative Medicine Communications; www.drkoop.com

Gout

Source: Integrative Medicine Communications; www.drkoop.com

Guinea Worm Disease

Source: Integrative Medicine Communications; www.drkoop.com

Hay Fever

Source: Integrative Medicine Communications; www.drkoop.com

Heart Attack

Source: Integrative Medicine Communications; www.drkoop.com

Hemophilia

Source: Integrative Medicine Communications; www.drkoop.com

Hemorrhoids

Source: Integrative Medicine Communications; www.drkoop.com

Herpes Zoster and Varicella Viruses

Source: Integrative Medicine Communications; www.drkoop.com

High Blood Pressure

Source: Integrative Medicine Communications; www.drkoop.com

Hirsutism

Source: Integrative Medicine Communications; www.drkoop.com

HIV and AIDS

Source: Integrative Medicine Communications; www.drkoop.com

Hookworm

Source: Integrative Medicine Communications; www.drkoop.com

Hyperkalemia

Source: Integrative Medicine Communications; www.drkoop.com

Hypertension

Source: Integrative Medicine Communications; www.drkoop.com

Hyperthyroidism

Source: Integrative Medicine Communications; www.drkoop.com

Hypochondriasis

Source: Integrative Medicine Communications; www.drkoop.com

Hypoglycemia

Source: Integrative Medicine Communications; www.drkoop.com

Hypothermia

Source: Integrative Medicine Communications; www.drkoop.com

Hypothyroidism

Source: Integrative Medicine Communications; www.drkoop.com

Inflammatory Bowel Disease

Source: Integrative Medicine Communications; www.drkoop.com

Influenza

Source: Integrative Medicine Communications; www.drkoop.com

Insomnia

Source: Healthnotes, Inc. www.healthnotes.com

Insomnia

Source: Integrative Medicine Communications; www.drkoop.com

Irritable Bowel Syndrome

Source: Healthnotes, Inc. www.healthnotes.com

Irritable Bowel Syndrome

Source: Integrative Medicine Communications; www.drkoop.com

Kidney Stones

Source: Integrative Medicine Communications; www.drkoop.com

Laryngitis

Source: Integrative Medicine Communications; www.drkoop.com

Leukemia

Source: Integrative Medicine Communications; www.drkoop.com

Liver Disease

Source: Integrative Medicine Communications; www.drkoop.com

Loiasis

Source: Integrative Medicine Communications; www.drkoop.com

Low Back Pain

Source: Integrative Medicine Communications; www.drkoop.com

Low Blood Sugar

Source: Integrative Medicine Communications; www.drkoop.com

Lung Cancer

Source: Integrative Medicine Communications; www.drkoop.com

Lupus

Source: Integrative Medicine Communications; www.drkoop.com

Lyme Disease

Source: Integrative Medicine Communications; www.drkoop.com

Lymphatic Filariasis

Source: Integrative Medicine Communications; www.drkoop.com

Lymphoma

Source: Integrative Medicine Communications; www.drkoop.com

Macular Degeneration

Source: Integrative Medicine Communications; www.drkoop.com

Male Infertility

Source: Healthnotes, Inc. www.healthnotes.com

Measles

Source: Integrative Medicine Communications; www.drkoop.com

Ménière's Disease

Source: Healthnotes, Inc. www.healthnotes.com

Menopausal Symptoms (Other Than Osteoporosis)

Source: Prima Communications, Inc. www.personalhealthzone.com

Menopause

Source: Healthnotes, Inc. www.healthnotes.com

Menopause

Source: Integrative Medicine Communications; www.drkoop.com

Menstrual Pain

Source: Integrative Medicine Communications; www.drkoop.com

Migraine Headaches

Source: Healthnotes, Inc. www.healthnotes.com

Migraine Headaches

Source: Prima Communications, Inc. www.personalhealthzone.com

Miscarriage

Source: Integrative Medicine Communications; www.drkoop.com

Mononucleosis

Source: Integrative Medicine Communications; www.drkoop.com

Morning Sickness

Source: Healthnotes, Inc. www.healthnotes.com

Motion Sickness

Source: Integrative Medicine Communications; www.drkoop.com

Multiple Sclerosis

Source: Integrative Medicine Communications; www.drkoop.com

Mumps

Source: Integrative Medicine Communications; www.drkoop.com

Myelofibrosis

Source: Integrative Medicine Communications; www.drkoop.com

Myeloproliferative Disorders

Source: Integrative Medicine Communications; www.drkoop.com

Myocardial Infarction

Source: Integrative Medicine Communications; www.drkoop.com

Nail Disorders

Source: Integrative Medicine Communications; www.drkoop.com

Obesity

Source: Integrative Medicine Communications; www.drkoop.com

Osteoarthritis

Source: Healthnotes, Inc. www.healthnotes.com

Osteoarthritis

Source: Integrative Medicine Communications; www.drkoop.com

Osteoporosis

Source: Integrative Medicine Communications; www.drkoop.com

Otitis Media

Source: Integrative Medicine Communications; www.drkoop.com

Pain

Source: Healthnotes, Inc. www.healthnotes.com

Pancreas, Inflammation of

Source: Integrative Medicine Communications; www.drkoop.com

Pancreatitis

Source: Integrative Medicine Communications; www.drkoop.com

Parasitic Infection, Roundworms

Source: Integrative Medicine Communications; www.drkoop.com

Parkinson's Disease

Source: Healthnotes, Inc. www.healthnotes.com

Pelvic Inflammatory Disease

Source: Integrative Medicine Communications; www.drkoop.com

Peptic Ulcer

Source: Integrative Medicine Communications; www.drkoop.com

Peripheral Vascular Disease

Source: Healthnotes, Inc. www.healthnotes.com

Peritonitis

Source: Integrative Medicine Communications; www.drkoop.com

Pertussis

Source: Integrative Medicine Communications; www.drkoop.com

Pharyngitis

Source: Integrative Medicine Communications; www.drkoop.com

Photodermatitis

Source: Integrative Medicine Communications; www.drkoop.com

Pink Eye

Source: Integrative Medicine Communications; www.drkoop.com

Pinworm

Source: Integrative Medicine Communications; www.drkoop.com

PMS

Source: Integrative Medicine Communications; www.drkoop.com

Polycythemia Vera

Source: Integrative Medicine Communications; www.drkoop.com

Post Traumatic Stress Disorder

Source: Integrative Medicine Communications; www.drkoop.com

Pregnancy and Postpartum Support

Source: Healthnotes, Inc. www.healthnotes.com

Premenstrual Syndrome

Source: Integrative Medicine Communications; www.drkoop.com

Proctitis

Source: Integrative Medicine Communications; www.drkoop.com

Prostate Cancer

Source: Integrative Medicine Communications; www.drkoop.com

Prostatitis

Source: Healthnotes, Inc. www.healthnotes.com

Psoriasis

Source: Healthnotes, Inc. www.healthnotes.com

PTSD

Source: Integrative Medicine Communications; www.drkoop.com

Pulmonary Edema

Source: Integrative Medicine Communications; www.drkoop.com

Pulmonary Hypertension

Source: Integrative Medicine Communications; www.drkoop.com

Pyloric Stenosis

Source: Integrative Medicine Communications; www.drkoop.com

Raynaud's Phenomenon

Source: Integrative Medicine Communications; www.drkoop.com

Rectal Inflammation

Source: Integrative Medicine Communications; www.drkoop.com

Reiter's Syndrome

Source: Integrative Medicine Communications; www.drkoop.com

Respiratory Infection, Bronchitis

Source: Integrative Medicine Communications; www.drkoop.com

River Blindness

Source: Integrative Medicine Communications; www.drkoop.com

Roundworms

Source: Integrative Medicine Communications; www.drkoop.com

Rubella

Source: Integrative Medicine Communications; www.drkoop.com

Sarcoidosis

Source: Integrative Medicine Communications; www.drkoop.com

Scleroderma

Source: Integrative Medicine Communications; www.drkoop.com

Seizure Disorders

Source: Integrative Medicine Communications; www.drkoop.com

Sexual Dysfunction

Source: Integrative Medicine Communications; www.drkoop.com

Sexually Transmitted Diseases

Source: Integrative Medicine Communications; www.drkoop.com

Shingles and Chickenpox

Source: Integrative Medicine Communications; www.drkoop.com

Shingles and Postherpetic Neuralgia

Source: Healthnotes, Inc. www.healthnotes.com

Shock

Source: Integrative Medicine Communications; www.drkoop.com

Sinus Congestion

Source: Healthnotes, Inc. www.healthnotes.com

Skin Cancer

Source: Integrative Medicine Communications; www.drkoop.com

Skin Disorders, Dermatitis

Source: Integrative Medicine Communications; www.drkoop.com

Skin Infection

Source: Integrative Medicine Communications; www.drkoop.com

Sleep Apnea

Source: Integrative Medicine Communications; www.drkoop.com

Sleeplessness

Source: Integrative Medicine Communications; www.drkoop.com

Sore Throat

Source: Integrative Medicine Communications; www.drkoop.com

Spastic Colon

Source: Integrative Medicine Communications; www.drkoop.com

Spontaneous Abortion

Source: Integrative Medicine Communications; www.drkoop.com

Sprains and Strains

Source: Integrative Medicine Communications; www.drkoop.com

STDs

Source: Integrative Medicine Communications; www.drkoop.com

Stomach Inflammation

Source: Integrative Medicine Communications; www.drkoop.com

Stroke

Source: Integrative Medicine Communications; www.drkoop.com

Sunburn

Source: Integrative Medicine Communications; www.drkoop.com

Syncope

Source: Integrative Medicine Communications; www.drkoop.com

Systemic Lupus Erythematosus

Source: Integrative Medicine Communications; www.drkoop.com

Temporomandibular Joint Dysfunction

Source: Integrative Medicine Communications; www.drkoop.com

Tension Headache

Source: Healthnotes, Inc. www.healthnotes.com

Tension Headache

Source: Integrative Medicine Communications; www.drkoop.com

Threadworm

Source: Integrative Medicine Communications; www.drkoop.com

Thrombocytosis

Source: Integrative Medicine Communications; www.drkoop.com

Thyroid Inflammation

Source: Integrative Medicine Communications; www.drkoop.com

Thyroiditis

Source: Integrative Medicine Communications; www.drkoop.com

TIAs

Source: Integrative Medicine Communications; www.drkoop.com

Tinnitus

Source: Healthnotes, Inc. www.healthnotes.com

TMJ

Source: Integrative Medicine Communications; www.drkoop.com

Transient Ischemic Attacks

Source: Integrative Medicine Communications; www.drkoop.com

Trichinosis

Source: Integrative Medicine Communications; www.drkoop.com

Ulcerative Colitis

Source: Integrative Medicine Communications; www.drkoop.com

Urethral Inflammation

Source: Integrative Medicine Communications; www.drkoop.com

Urethritis

Source: Integrative Medicine Communications; www.drkoop.com

Urinary Incontinence

Source: Integrative Medicine Communications; www.drkoop.com

Urinary Tract Infection

Source: Healthnotes, Inc. www.healthnotes.com

Urinary Tract Infection in Women

Source: Integrative Medicine Communications; www.drkoop.com

UTI

Source: Integrative Medicine Communications; www.drkoop.com

Uveitis

Source: Integrative Medicine Communications; www.drkoop.com

Vaginal Inflammation

Source: Integrative Medicine Communications; www.drkoop.com

Vaginitis

Source: Integrative Medicine Communications; www.drkoop.com

Varicella and Herpes Zoster Viruses

Source: Integrative Medicine Communications; www.drkoop.com

Varicose Veins

Source: Integrative Medicine Communications; www.drkoop.com

Vertigo

Source: Healthnotes, Inc. www.healthnotes.com

Visceral Larva Migrans

Source: Integrative Medicine Communications; www.drkoop.com

Warts

Source: Integrative Medicine Communications; www.drkoop.com

Water Retention

Source: Integrative Medicine Communications; www.drkoop.com

Whipworm

Source: Integrative Medicine Communications; www.drkoop.com

Whooping Cough

Source: Integrative Medicine Communications; www.drkoop.com

- **Alternative Therapy**

Acu-point therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acupressure

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,662,00.html

Acupuncture

Source: Healthnotes, Inc. www.healthnotes.com

Acupuncture

Source: Integrative Medicine Communications; www.drkoop.com

Acupuncture

Alternative names: acupuncture therapy Zhenjiu

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acupuncture

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,663,00.html

Acupuncture anesthesia

Alternative names: acupuncture analgesia acupuncture assisted anesthesia
anesthetic acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acupuncture cupping method

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acupuncture energetics

Alternative names: core acupuncture energetics

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acupuncture imaging

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acupuncture Osteopathy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Acu-yoga

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Applied kinesiology

Alternative names: AK kinesiology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Applied kinesiology

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,711,00.html

Aqua acupuncture

Alternative names: aqua acupuncture therapy aquapuncture the injection therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Aroma-Genera

Alternative names: Aroma-Genera system

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Aromatherapy

Source: Integrative Medicine Communications; www.drkoop.com

Asian medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Auricular acupuncture

Alternative names: auricular acupuncture therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Auricular analgesia

Alternative names: auricular analgesic acupuncture auricular acupuncture analgesia

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Auricular point injection

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Auriculotherapy

Alternative names: auricular acupuncture auricular therapy ear acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Ayurveda

Source: Integrative Medicine Communications; www.drkoop.com

Ayurvedic Acupuncture

Alternative names: Bhedan Karma traditional Indian acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/a.html>

Balance Therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

Beyond Medicine

Alternative names: Future Medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

Bi-Digital O-Ring Test Molecular Identification Method

Alternative names: Bi-Digital O-Ring Test O-Ring technique

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

Bindegewebsmassage

Alternative names: bindegewebsmassage system connective tissue massage

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

Biofeedback

Source: Integrative Medicine Communications; www.drkoop.com

Biological Archeology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

Body acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

BodyCentered

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

Bodywork

Alternative names: Bodywork Therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/b.html>

C.A.R.E.

Alternative names: Chakra Armor Release of Emotions

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Chinese auricular therapy

Alternative names: Chinese auricular acupuncture traditional Chinese auricular acu-points therapy traditional Chinese auricular acupuncture traditional Chinese auricular therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Chinese medicine

Alternative names: Traditional Chinese Medicine TCM

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Ching Lo

Alternative names: meridian therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Chiropractic

Source: Healthnotes, Inc. www.healthnotes.com

Chiropractic

Source: Integrative Medicine Communications; www.drkoop.com

Chiropractic

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,681,00.html

Classical Five Element Acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Classical homeopathy

Alternative names: unicist homeopathy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Color therapy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,683,00.html

Colorpuncture

Alternative names: Colorpuncture system Osho Esogetic Colorpuncture system
Lightpuncture Osho Lightpuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Complex homeopathy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Contemporary homeopathy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Cosmetic mercury-free dentistry

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Cosmic energy chi kung

Alternative names: Buddha palm Cosmic Chi Kung Cosmic Healing Chi Kung

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Cupping

Alternative names: cupping method cupping therapy; called the "horn method" in ancient China

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Curanderismo

Alternative names: curanderismo healing system

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Cymatic therapy

Alternative names: cymatic medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/c.html>

Diagnostic acupressure

Alternative names: acupressure diagnosis acupuncture diagnosis

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/d.html>

Dian xue

Alternative names: Cavity Press Massage Dian Xue An Mo

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/d.html>

Do-In

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/d.html>

Dr. Lynch's Holistic Self-Health Program

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/d.html>

Electroacupuncture

Alternative names: electric acupuncture electric acupuncture therapy electrical
acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Electroacupuncture According to Voll

Alternative names: EAV

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Electroacupuncture biofeedback

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Electrodiagnosis

Alternative names: bioelectric testing electrodermal screening electrodermal testing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Electro-homeopathy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Electromagnetic healing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Endo-nasal therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Energy Medicine

Source: Healthnotes, Inc. www.healthnotes.com

Energy psychology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Energy work

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Esogetics

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/e.html>

Feeling Light

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/f.html>

Foot Reflexology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/f.html>

French acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/f.html>

Healthology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Hemo-acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Herbal Medicine

Source: Integrative Medicine Communications; www.drkoop.com

Holistic dentistry

Alternative names: biological dentistry holistic general dentistry

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Holistic medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Holistic nursing

Alternative names: wholistic nursing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Holistic psychiatry

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Holistic Referrals

Source: Healthnotes, Inc. www.healthnotes.com

Homeoacupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Homeopathy

Source: Integrative Medicine Communications; www.drkoop.com

Homeopathy

Alternative names: homeopathic medicine homeotherapeutics homoeopathy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Homeopathy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,703,00.html

Homeovitics

Alternative names: homoeovitics

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Homuncular acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Hoshino Therapy

Alternative names: Hoshino Therapy Art

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Hydrotherapy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,705,00.html

Hypnotherapy

Source: Integrative Medicine Communications; www.drkoop.com

Hypnotherapy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,706,00.html

Integrated Kinesiology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/i.html>

Iridology

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,709,00.html

Kobayashi Technique

Alternative names: Applied Kobayashi Techniques Kobayashi Techniques

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/k.html>

Korean medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/k.html>

Lane System of 3-dimensional bioenergy analysis and nutritional healing

Alternative names: Lane System of bioenergy analysis and nutrition; Lane System of multilayer bioenergy analysis and nutrition; Lane System of multilayer bioenergy analysis and nutritional healing; 3-dimensional bioenergy analysis

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/l.html>

Laserpuncture

Alternative names: laser based acupuncture laser acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/l.html>

Laying on of hands

Alternative names: contact healing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/l.html>

Life Care Kinesiology

Alternative names: Life Care

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/l.html>

Life energy analysis

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/l.html>

Local healing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/l.html>

Macroreflexology

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/m.html>

Massage

Source: Integrative Medicine Communications; www.drkoop.com

Massage therapy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,716,00.html

MediPatch

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/m.html>

Meridian energy diagnosis

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/m.html>

Mind&Body Medicine

Source: Integrative Medicine Communications; www.drkoop.com

Moxabustion

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/m.html>

Myotherapy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,931,00.html

Natural and Macrobiotic Medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/n.html>

Naturoplogy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/n.html>

Naturopathic Medicine

Source: Healthnotes, Inc. www.healthnotes.com

Naturopathy

Source: Integrative Medicine Communications; www.drkoop.com

Naturopathy

Alternative names: natural healing natural health natural medicine natural therapies
nature cure naturology naturopathic healing naturopathic health care naturopathic
medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/n.html>

Naturopathy

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,722,00.html

Needle acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/n.html>

Neural therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/n.html>

Neuro-bioenergetic treatment

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/n.html>

Nutrition

Source: Integrative Medicine Communications; www.drkoop.com

Oriental massage

Alternative names: amma massage

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/o.html>

Oriental medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/o.html>

Osteopathy

Source: Integrative Medicine Communications; www.drkoop.com

Periosteal acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/p.html>

Planetary Herbology

Alternative names: Planetary Herbalism

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/p.html>

Pneumo-acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/p.html>

Prayer

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,728,00.html

Qigong

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,729,00.html

Rainbow Diet

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/r.html>

Ray methods of healing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/r.html>

Reflexology

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,730,00.html

Reflexotherapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/r.html>

Relaxation Techniques

Source: Integrative Medicine Communications; www.drkoop.com

RL-test

Alternative names: electropuncture RL-test

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/r.html>

Rolfing

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,732,00.html

Scalp acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/s.html>

Scalp acupuncture therapy

Alternative names: head acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/s.html>

Shiatsu

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,733,00.html

Sonopuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/s.html>

Spirituality

Source: Integrative Medicine Communications; www.drkoop.com

Tai Chi

Source: Integrative Medicine Communications; www.drkoop.com

Tapping therapies

Alternative names: tapping treatments

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

TCM acupuncture

Alternative names: New Acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

The Human Ecology Program

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/h.html>

Therapeutic Touch

Source: Integrative Medicine Communications; www.drkoop.com

Thirty-day energetic workout

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Thought Field Therapy

Alternative names: TFT Callahan Techniques[TM] Callahan Techniques Thought
Field Therapy [CTTFT] tapping therapy tap therapy

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Tibetan medicine

Alternative names: Amchi Emchi

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by
Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Tongue acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Touch And Breathe

Alternative names: TAB TAB approach

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Tracing

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Traditional acupuncture

Alternative names: Traditional Chinese acupuncture

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/t.html>

Traditional Chinese Medicine

Source: Integrative Medicine Communications; www.drkoop.com

Traditional Chinese medicine

Source: WholeHealthMD.com, LLC. www.wholehealthmd.com

Hyperlink:

http://www.wholehealthmd.com/refshelf/substances_view/0,1525,10085,00.html

VEGAtest method

Alternative names: Vega in vitro test method Vega method

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/v.html>

Vibrational medicine

Alternative names: energetic medicine energetics medicine energy medicine subtle-energy medicine vibrational healing vibrational therapies

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/v.html>

Vietnamese traditional medicine

Alternative names: Vietnamese medicine

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/v.html>

Yoga

Source: Integrative Medicine Communications; www.drkoop.com

Zhenjiu

Alternative names: acu-moxibustion acu-moxibustion therapy acupuncture-moxibustion acupuncture-moxibustion therapy chen-chiou therapy China Zhenjiuology Zhenjiuological science Zhenjiuological [sic] therapy Zhenjiuologic therapy Zhenjiuology Zhenjiu therapies

Source: The Canoe version of A Dictionary of Alternative-Medicine Methods, by Priorities for Health editor Jack Raso, M.S., R.D.

Hyperlink: <http://www.canoe.ca/AltmedDictionary/z.html>

- **Homeopathy**

- **Understanding Homeopathy Potency**

- Source: Healthnotes, Inc. www.healthnotes.com

- **What is Homeopathy?**

- Source: Healthnotes, Inc. www.healthnotes.com

- **Herbs and Supplements**

- **Acidophilus and Other Probiotics**

- Source: Prima Communications, Inc. www.personalhealthzone.com

- **Ananas comosus**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Angelica sinensis**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Astragalus mem**

- Alternative names: Huang-Qi; Astragalus membranaceus

- Source: Alternative Medicine Foundation, Inc. www.amfoundation.org

- Hyperlink: <http://www.herbmed.org/>

- **Brahmi**

- Alternative names: Centella asiatica , Centella, March Pennywort, Indian Pennywort, Hydrocotyle, Brahmi (Sanskrit), Luei Gong Gen (Chinese)(Note: Gotu kola should not be confused with kola nut.)

- Source: Integrative Medicine Communications; www.drkoop.com

- **Bromelain**

- Alternative names: Ananas comosus, Bromelainum

- Source: Integrative Medicine Communications; www.drkoop.com

- **Bromelainum**

- Source: Integrative Medicine Communications; www.drkoop.com

- **Centella**

- Source: Integrative Medicine Communications; www.drkoop.com

Centella asiatica

Alternative names: Centella asiatica , Centella, March Pennywort, Indian Pennywort, Hydrocotyle, Brahmi (Sanskrit), Luei Gong Gen (Chinese)(Note: Gotu kola should not be confused with kola nut.)

Source: Integrative Medicine Communications; www.drkoop.com

Chinese Angelica

Source: Integrative Medicine Communications; www.drkoop.com

Danggui

Alternative names: Angelica sinensis, Chinese Angelica, Dang Gui, Danngui, Dong Qua, Tang Kuei, Tan Kue Bai zhi(Note: Dong quai should not be confused with Angelica root or Angelica seed.)

Source: Integrative Medicine Communications; www.drkoop.com

Dong Quai

Alternative names: Angelica sinensis, Chinese Angelica, Dang Gui, Danngui, Dong Qua, Tang Kuei, Tan Kue Bai zhi(Note: Dong quai should not be confused with Angelica root or Angelica seed.)

Source: Integrative Medicine Communications; www.drkoop.com

Echinacea

Source: Prima Communications, Inc.www.personalhealthzone.com

Eugenia Clove

Alternative names: Cloves; Eugenia sp.

Source: Alternative Medicine Foundation, Inc. www.amfoundation.org

Hyperlink: <http://www.herbmed.org/>

Ginkgo

Source: Prima Communications, Inc.www.personalhealthzone.com

Glycyrrhiza1

Alternative names: Licorice; Glycyrrhiza glabra L.

Source: Alternative Medicine Foundation, Inc. www.amfoundation.org

Hyperlink: <http://www.herbmed.org/>

Gotu Kola

Alternative names: Centella asiatica , Centella, March Pennywort, Indian Pennywort, Hydrocotyle, Brahmi (Sanskrit), Luei Gong Gen (Chinese)(Note: Gotu kola should not be confused with kola nut.)

Source: Integrative Medicine Communications; www.drkoop.com

Hawthorn

Source: Prima Communications, Inc.www.personalhealthzone.com

Hydrastis

Alternative names: Goldenseal; Hydrastis canadensis L.

Source: Alternative Medicine Foundation, Inc. www.amfoundation.org

Hyperlink: <http://www.herbmed.org/>

Hydrocotyle

Source: Integrative Medicine Communications; www.drkoop.com

Indian Pennywort

Source: Integrative Medicine Communications; www.drkoop.com

Marsh Pennywort

Alternative names: Centella asiatica , Centella, March Pennywort, Indian Pennywort, Hydrocotyle, Brahmi (Sanskrit), Luei Gong Gen (Chinese)(Note: Gotu kola should not be confused with kola nut.)

Source: Integrative Medicine Communications; www.drkoop.com

Melatonin

Source: Healthnotes, Inc. www.healthnotes.com

Melatonin

Source: Integrative Medicine Communications; www.drkoop.com

Proteolytic Enzymes

Source: Prima Communications, Inc. www.personalhealthzone.com

Shark Cartilage

Source: Integrative Medicine Communications; www.drkoop.com

St. John's Wort

Source: Prima Communications, Inc. www.personalhealthzone.com

Tang Kuei

Source: Integrative Medicine Communications; www.drkoop.com

Traditional Chinese Medicine Herbs

Source: Healthnotes, Inc. www.healthnotes.com

Uncaria asian

Alternative names: Asian species; Uncaria sp.

Source: Alternative Medicine Foundation, Inc. www.amfoundation.org

Hyperlink: <http://www.herbmed.org/>

Zingiber

Alternative names: Ginger; Zingiber officinale Roscoe

Source: Alternative Medicine Foundation, Inc. www.amfoundation.org

Hyperlink: <http://www.herbmed.org/>

General References

A good place to find general background information on CAM is the National Library of Medicine. It has prepared within the MEDLINEplus system an information topic page dedicated to complementary and alternative medicine. To access this page, go to the MEDLINEplus site at <http://www.nlm.nih.gov/medlineplus/alternativemedicine.html>. This Web site provides a general overview of various topics and can lead to a number of general sources.

CHAPTER 4. DISSERTATIONS ON ALTERNATIVE MEDICINE

Overview

In this chapter, we will give you a bibliography on recent dissertations relating to alternative medicine. We will also provide you with information on how to use the Internet to stay current on dissertations. **IMPORTANT NOTE:** When following the search strategy described below, you may discover non-medical dissertations that use the generic term “alternative medicine” (or a synonym) in their titles. To accurately reflect the results that you might find while conducting research on alternative medicine, we have not necessarily excluded non-medical dissertations in this bibliography.

Dissertations on Alternative Medicine

ProQuest Digital Dissertations, the largest archive of academic dissertations available, is located at the following Web address: <http://wwwlib.umi.com/dissertations>. From this archive, we have compiled the following list covering dissertations devoted to alternative medicine. You will see that the information provided includes the dissertation’s title, its author, and the institution with which the author is associated. The following covers recent dissertations found when using this search procedure:

- **A Survey of Predisposing, Reinforcing and Enabling Factors Which Influence Interest in Utilizing Alternative Medicine (complementary Medicine, Health Care)** by Edwards, Maureen Paula, Phd from University of Maryland College Park, 1995, 150 pages
<http://wwwlib.umi.com/dissertations/fullcit/9607755>
- **Alternative Medicine and the Elderly** by Klein, Janice, Phd from University of California, San Francisco, 1981, 286 pages
<http://wwwlib.umi.com/dissertations/fullcit/8111269>
- **Alternative Medicine for Hiv Disease: Strategies for Managing Everyday Life, Sociocultural Barriers to Use, and the (de)medicalization of Aids** by Foote-ardah, Carrie Elizabeth; Phd from University of Colorado at Boulder, 2002, 182 pages
<http://wwwlib.umi.com/dissertations/fullcit/3043525>

- **An Analysis of Paracelsus's Medical Philosophy and Practice with Some Modern Day Implications (theophrastus Von Hohenheim, Homeopathy)** by Andrews, Steven Curry, Phd from The Pennsylvania State University, 1995, 203 pages
<http://wwwlib.umi.com/dissertations/fullcit/9600136>
- **An Analysis of the Use of Alternative Medicine by Undergraduate Residential College Students** by Hofilena, Melissa Angela; Mph from Southern Connecticut State University, 2002, 81 pages
<http://wwwlib.umi.com/dissertations/fullcit/1410057>
- **Attitudes among Physicians and Complementary and Alternative Medicine Practitioners: a Cross-professional Analysis** by French, James Chester; Ma from California State University, Fullerton, 2002, 154 pages
<http://wwwlib.umi.com/dissertations/fullcit/1410527>
- **Characteristics of Providers and Consumers of Alternative Medicine: a Delphi Study** by Reid, Cynthia Lee, Phd from Texas Woman's University, 1997, 118 pages
<http://wwwlib.umi.com/dissertations/fullcit/9818567>
- **Chiropractic in America: the Flourishing of a Medical Pariah (alternative Medicine, Medical Movements)** by Moore, Johnny Stuart, Phd from University of Virginia, 1990, 374 pages
<http://wwwlib.umi.com/dissertations/fullcit/9131582>
- **Complementary and Alternative Medicine: Nature, Origins, Ethics and Regulation** by O'rourke, Patricia Mary; Phd from Concordia University (canada), 2001, 479 pages
<http://wwwlib.umi.com/dissertations/fullcit/NQ63987>
- **Considering the Alternatives: the White House Commission on Complementary and Alternative Medicine Policy** by O'connell, Eileen Marie; Phd from University of Massachusetts Boston, 2002, 141 pages
<http://wwwlib.umi.com/dissertations/fullcit/3045368>
- **Healing Narratives of Middle Class Suburban Americans (alternative Medicine)** by Kantor, Debra Jean, Phd from Rutgers the State University of New Jersey - New Brunswick, 1993, 176 pages
<http://wwwlib.umi.com/dissertations/fullcit/9320526>
- **Identifying and Explaining Alternative Medicine Use in a Professional Urban Setting** by Lee, William Hyunsuk, Phd from The University of New Mexico, 1998, 111 pages
<http://wwwlib.umi.com/dissertations/fullcit/9839214>
- **Philosophical Foundations in Ancient Indian Medicine: Science, Philosophy, and Ethics in 'caraka-samhita' (alternative Medicine, Sanskrit Literature)** by Thaker, Pramod B., Phd from Boston College, 1995, 254 pages
<http://wwwlib.umi.com/dissertations/fullcit/9605413>
- **The Lifestyle Changes of Selected Therapeutic Touch Practitioners: an Oral History (alternative Medicine)** by Peters, Pamela Joan, Phd from Walden University, 1992, 146 pages
<http://wwwlib.umi.com/dissertations/fullcit/9512673>
- **The Meaning of Health: Differences between Cohorts and between Users of Biomedicine and Complementary/alternative Medicine** by Cochran, Roger Arthur; Phd from Georgia State University, 2002, 328 pages
<http://wwwlib.umi.com/dissertations/fullcit/3075421>
- **The Medicine of Hildegard of Bingen: Her Twelfth-century Theories and Their Twentieth-century Appeal As a Form of Alternative Medicine (twelfth Century,**

Germany) by Cannon, Sue Spencer, Phd from University of California, Los Angeles, 1993, 210 pages

<http://wwwlib.umi.com/dissertations/fullcit/9320366>

- **The Prevalence of Alternative Medicine Use in a Rural Western County** by Thunell, Heather Elizabeth; Ms from Utah State University, 2002, 133 pages
<http://wwwlib.umi.com/dissertations/fullcit/1408276>
- **The Rhetorical Agon of Allopathic and Alternative Medicine: Marginalization, Resistance and Empowerment in Dr. Richard Schulze's Botanically-based Natural Healing Crusade** by Vankevich, Ned; Phd from Regent University, 2001, 426 pages
<http://wwwlib.umi.com/dissertations/fullcit/3029877>
- **The Use of Complementary and Alternative Medicine by People with Multiple Sclerosis** by Page, Stacey Ann; Phd from University of Calgary (canada), 2002, 206 pages
<http://wwwlib.umi.com/dissertations/fullcit/NQ77033>
- **The Use of Complementary and Alternative Medicine: an Urban Study of Mid-life Women** by Bowes, Jane I. Phd from The University of New Mexico, 2001, 234 pages
<http://wwwlib.umi.com/dissertations/fullcit/3009836>

Keeping Current

Ask the medical librarian at your library if it has full and unlimited access to the *ProQuest Digital Dissertations* database. From the library, you should be able to do more complete searches via <http://wwwlib.umi.com/dissertations>.

CHAPTER 5. CLINICAL TRIALS AND ALTERNATIVE MEDICINE

Overview

In this chapter, we will show you how to keep informed of the latest clinical trials concerning alternative medicine.

Recent Trials on Alternative Medicine

The following is a list of recent trials dedicated to alternative medicine.⁸ Further information on a trial is available at the Web site indicated.

- **A Randomized Study of Electroacupuncture Treatment for Delayed Chemotherapy-induced Nausea and Vomiting in Patients with Pediatric Sarcomas**

Condition(s): Sarcoma; Nausea; Vomiting

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM); National Cancer Institute (NCI); National Institute of Dental and Craniofacial Research (NIDCR)

Purpose - Excerpt: This study will investigate the efficacy of electroacupuncture to reduce delayed chemotherapy-induced nausea in pediatric and young adult patients with pediatric sarcoma.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00034996>

⁸ These are listed at www.ClinicalTrials.gov.

- **Acupuncture and Acupressure in Treating Patients With Moderate or Severe Pain Related to Stage III or Stage IV Pancreatic Cancer**

Condition(s): stage III pancreatic cancer; recurrent pancreatic cancer; Pain; stage IVA pancreatic cancer; stage IVB pancreatic cancer

Study Status: This study is currently recruiting patients.

Sponsor(s): Memorial Sloan-Kettering Cancer Center; National Cancer Institute (NCI)

Purpose - Excerpt: RATIONALE: **acupuncture** and acupressure may help relieve moderate or severe pain associated with stage III or stage IV pancreatic cancer. PURPOSE: Phase II trial to study the effectiveness of **acupuncture** and acupressure in treating patients who have moderate or severe pain associated with stage III or stage IV pancreatic cancer.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00040833>

- **Acupuncture and Hypertension**

Condition(s): Hypertension

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Although traditional Chinese medicine advocates the use of **acupuncture** not only to induce analgesia but also to treat essential hypertension, acupuncture's postulated antihypertensive efficacy in humans has not been subjected to rigorous Western scientific testing. Before advocating **acupuncture** as an effective complementary/alternative medicine strategy for essential hypertension, it is necessary to demonstrate that the beneficial effects of **acupuncture** are scientifically robust, long-lasting, and explicable in terms of modern scientific mechanisms. In spontaneously hypertensive rats, acupuncture-like electrical stimulation of thinly myelinated (Group III) somatic afferents activates central endorphin (naloxone-sensitive) pathways that elicit long-lasting decreases in sympathetic nerve activity (SNA) and blood pressure. The ability to record SNA with microelectrodes in conscious humans provides a new opportunity to test this novel mechanistic hypothesis in patients undergoing electroacupuncture, a modification of the ancient technique that provides a quantifiable and reproducible stimulus to human skeletal muscle afferents. Using a randomized, double-blind placebo-controlled design, we will test the following major hypotheses: Electroacupuncture produces a long-lasting reduction in SNA, thereby providing a safe and effective complementary treatment of human hypertension. Given the enormous interest in **acupuncture** by our lay public, but the paucity of Western scientific data about its efficacy in cardiovascular disorders, our studies in normotensive and hypertensive humans should provide a conceptual framework for deciding whether to accept or reject the large body of Chinese (and Russian) literature advocating **acupuncture** as a safe and effective treatment of essential hypertension and other cardiovascular disorders (such as heart failure, and myocardial ischemia).

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010478>

- **Acupuncture and Moxa: A RCT for Chronic Diarrhea in HIV Patients**

Condition(s): HIV Infections

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM); National Institute of Nursing Research (NINR)

Purpose - Excerpt: The objective of this study is to test alternative treatment strategies to reduce the frequency of chronic diarrhea among HIV positive individuals. 60 percent of patients with HIV disease in the U.S. will have diarrhea at some point in their illness. Although in general many of the opportunistic infections (OI's) associated with HIV have decreased due to new "drug cocktails", many of these drugs, however, have diarrhea as a side effect. In Asian countries, **acupuncture** (including moxibustion) has been widely used for the treatment of various gastrointestinal (GI) disorders. However, there are no published studies that test treatment protocols using **acupuncture** or moxibustion on patients with HIV experiencing chronic diarrhea.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010491>

- **Acupuncture for Shortness of Breath in Cancer Patients**

Condition(s): Lung Cancer; Breast Cancer; Shortness of Breath

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to determine whether **acupuncture** is effective in relieving shortness of breath among breast and lung cancer patients.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00067691>

- **Acupuncture for the Treatment of Post-Traumatic Stress Disorder (PTSD)**

Condition(s): Stress Disorders, Post-Traumatic

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to evaluate **acupuncture** as a treatment for Post-Traumatic Stress Disorder (PTSD) and to correlate the diagnosis of PTSD with Traditional Chinese Medicine (TCM) diagnostic patterns.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00055354>

- **Acupuncture in Cardiovascular Disease**

Condition(s): Congestive Heart Failure

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to determine if **acupuncture** decreases adrenaline levels in heart failure, thereby potentially improving survival and quality of life.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00032422>

- **Acupuncture in Treating Mucositis-Related Pain Caused by Chemotherapy in Patients Undergoing Stem Cell Transplantation**

Condition(s): Cancer; oral complications of cancer and cancer therapy; Pain

Study Status: This study is currently recruiting patients.

Sponsor(s): National Cancer Institute (NCI)

Purpose - Excerpt: RATIONALE: **acupuncture** may be effective in relieving mucositis-related pain caused by chemotherapy in patients undergoing stem cell transplantation. PURPOSE: Randomized clinical trial to study the effectiveness of **acupuncture** in treating mucositis-related pain caused by high-dose chemotherapy in patients who are undergoing stem cell transplantation.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00060021>

- **Acupuncture Needling on Connective Tissue by Ultrasound**

Condition(s): Healthy; MEDLINEplus consumer health information

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to investigate the effect of **acupuncture** needling on connective tissue using ultrasound techniques both in animals and in humans.

Study Type: Observational

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00064818>

- **Acupuncture Safety/Efficacy in Knee Osteoarthritis**

Condition(s): Osteoarthritis, Knee

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The goal of this research is to determine the efficacy and safety of Traditional Chinese **acupuncture** (TCA) in patients with osteoarthritis of the knee. A three arm randomized controlled trial (RCT) using sham TCA, true TCA, and an

education/attention comparison group with a total sample of 525 is proposed. Primary hypothesis to be tested is that patients randomized to true TCA will have significantly more improvement in pain and function as measured by the Womac Pain & Function Scales and patient global assessments than patients randomized to the sham **acupuncture** and education/attention control groups. Secondary aims of the study are to 1) determine if improvement with TCA differs between patients below age 65 vs. those aged 65 and above, 2) to determine if improvement with TCA differs by racial/ethnic group (ie., Caucasian, Black, Hispanic), and 3) to determine if improvement with TCA differs by stage of radiographic severity of knee OA at baseline (KL grade 2, 3 or 4)

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010946>

- **Acupuncture to Reduce Symptoms of Advanced Colorectal Cancer**

Condition(s): Colorectal Neoplasms

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This study investigates the effect of **acupuncture** in reducing symptom distress in adults with advanced colon cancer.

Phase(s): Phase I

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00034034>

- **Alternative Medicine Approaches for Women with Temporomandibular Disorders.**

Condition(s): Temporomandibular Joint Disorders

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Temporomandibular disorders (TMD) are characterized by pain and tenderness in the muscles of mastication and/or the temporomandibular joint (TMJ), limitations of jaw opening often accompanied by deviations in mandibular path, and clicking, popping or grating TMJ sounds. TMD is often found in association with other problems: depression, anxiety, sleep disturbances, gastrointestinal symptoms, frequent infections, etc. This project proposes to holistically address patient symptoms through three different approaches, Naturopathic Medicine (NM), Traditional Chinese Medicine (TCM), and usual care at KPNW. We will conduct a pilot test and Phase II trial to evaluate the two alternative healing approaches, TCM (n=50) and NM (n=50) delivered by TCM and NM practitioners, are as effective as usual TMD care (n=50) provided by dental clinicians in the KPNW TMD Clinic. Subjects will be females 25-55 years of age with multiple health problems (defined as patients who have had at least 4 organ system-grouped diagnoses in the past year, not including TMD). Subjects will be evaluated at baseline, 6 and 12 months after start of treatment. The primary endpoint is change from baseline in the Axis II Pain Related Disability and Psychological Status

Scale. Clinical examinations, saliva samples to assess salivary cortisol levels, and responses to a series of questionnaires to assess pain, chronic pain, psychosocial functioning, and other physical symptoms will be used to assess outcomes. We will passively monitor health care utilization within KPNW using clinical, research, and administrative databases to determine whether the interventions have an impact on overall health care utilization. If either of these alternative interventions is shown to merit Phase III trial, our goal is to design and implement such a clinical trial to further evaluate the health consequences and costs of these alternative healing paradigms.

Phase(s): Phase II

Study Type: Interventional

Contact(s): Cheryl Ritenbaugh 1-503-335-6668 cheryl.ritenbaugh@kpchr.org

Web Site: <http://clinicaltrials.gov/ct/show/NCT00009594>

- **Complementary Medicine Approaches to TMD Pain Management**

Condition(s): Temporomandibular Joint Disorders

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Temporomandibular disorders are characterized by pain and tenderness in the muscles of mastication and/or the temporomandibular joint (TMJ), limitations of jaw opening often accompanied by deviations in mandibular path, and clicking, popping or grating TMJ sounds. This Phase II clinical trial will evaluate whether selected complementary approaches to TMD pain management-acupuncture (n=100), chiropractic therapy (n=50), and bodywork therapy (n=50)-delivered by complementary practitioners is as effective as usual TMD care (n=50) provided by clinicians in the KPNW TMD clinic. Subjects will be 18-70 years of age and psychologically functional TMD patients. Functional TMD patients are defined as minimally impacted by their TMD condition, reporting low-moderate pain that is not associated with activity limitation, undue reliance on health care, or psychological disturbance. Subjects will be evaluated at baseline, and six and 12 months post-intervention. Clinical examinations, saliva samples to assess salivary cortisol levels, and a series of questionnaires to assess pain and grade of dysfunctional pain, psychological functioning, and other physical symptoms will be used to assess outcomes. The investigators will passively monitor health care utilization within KPNW using clinical, research, and administrative databases. If these complementary interventions are shown to be effective, the goal is to design and implement a Phase III clinical trial to further evaluate the health consequences and cost of these therapies.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010621>

- **Complementary/Alternative Medicine for Abnormality in the Vestibular (Balance) System**

Condition(s): Vestibular Neuritis

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to determine the relative merits of vestibular rehabilitation and Tai Chi for patients with inner ear (vestibular) disorders.

Phase(s): Phase I; Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00032383>

- **Efficacy of Acupuncture with Physical Therapy for Knee Osteo-Arthritis**

Condition(s): Osteoarthritis

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This study will examine the efficacy of **acupuncture** in combination with exercise physical therapy for moderate osteoarthritis (OA) of the knee.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00035399>

- **Ginkgo Biloba: Antidepressant-Induced Sexual Dysfunction**

Condition(s): Hypoactive Sexual Desire Disorder; Sexual Dysfunctions, Psychological

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to provide the first empirical examination of the effects of Ginkgo biloba (GBE), sex therapy, and a combination of the two on subjective and physiological measures of sexual function in women who are experiencing sexual disorders secondary to antidepressants.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00034021>

- **Home Based Massage and Relaxation for Sickle Cell Pain**

Condition(s): Sickle Cell Disease

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to compare the effects of in-home, family-administered massage and in-home relaxation training on measures of physical status and health care utilization in a sample of African American adolescents age 15 years and older and adults with chronic pain associated with sickle cell disease who have been randomly assigned to six sessions of either family-administered massage or progressive muscle relaxation training.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00066079>

- **Interaction Between Patient and Healthcare Provider: Response to Acupuncture in Knee Osteoarthritis**

Condition(s): Osteoarthritis

Study Status: This study is currently recruiting patients.

Sponsor(s): National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS); National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Interactions between patients and healthcare providers may have a significant impact on a patient's response to therapy. In this study, patients with osteoarthritis (OA) of the knee will receive either **acupuncture** or sham **acupuncture**. The acupuncturists will be trained to interact with the patients in specific ways. The study will evaluate those interactions.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00059345>

- **Massage Therapy for Cancer-Related Fatigue**

Condition(s): Breast Neoplasms; Ovarian Neoplasms; Prostatic Neoplasms; Colorectal Neoplasms

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to develop methods for studying the effect of bodywork therapy on symptoms of fatigue in patients undergoing cancer chemotherapy.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00039793>

- **Meditation-Based Treatment for Binge Eating Disorder**

Condition(s): Binge Eating Disorder; Obesity

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to assess the relative effectiveness of a mindfulness meditation-based intervention for binge eating disorder in comparison to a psycho-educational intervention and a waiting-list control group.

Phase(s): Phase II; Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00032760>

- **Mindfulness-Based Art Therapy for Cancer Patients**

Condition(s): Cancer

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to determine whether cancer patients who receive the mindfulness-based art therapy (MBAT) program demonstrate improvement in health-related quality of life, a reduction in stress-related symptoms, and enhanced coping responses.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00034970>

- **Oregon Center for CAM in Neurological Disorders**

Condition(s): Neurological Disorders

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The mission of the Oregon Center for Complementary and **alternative medicine** in Neurological Disorders (ORCCAMIND) is to facilitate research and education on the effectiveness and mechanisms of action of complementary and **alternative medicine** (CAM) therapies in the treatment of neurological disorders. The integration of conventional medicine and CAM communities is critical for the success of ORCCAMIND. Thus, ORCCAMIND is composed of six institutions: Oregon Health Sciences University; National College of Naturopathic Medicine; Western States Chiropractic College; Oregon College of Oriental Medicine; the Linus Pauling Institute at Oregon State University; and the Portland Veterans Affairs Medical Center. ORCCAMIND will initially focus on the use of CAM antioxidants and stress reduction as treatments for neurodegenerative and demyelinating diseases because many of these diseases have oxidative injury as a causative or contributory factor and several CAM approaches have direct or indirect anti-oxidant effects. Through the Career Development Program the Developmental Research Program and the activities of the Education and Information Core, we will also foster and promote research into other CAM approaches for neurologic diseases that extend beyond anti-oxidant therapies. ORCCAMIND will achieve its goals by carrying out 4 Research Projects and maintaining 4 Core facilities that integrate the research strengths of conventional medicine and CAM practitioners and researchers. ORCCAMIND draws its strength from the multi-institutional support and the quality of all its investigators. The investigators join ORCCAMIND with extensive experience with clinical trials, patient care, externally funded basic and clinical neuroscience research, and training programs, including federally-funded training grants. ORCCAMIND is a bold initiative that integrates basic and clinical research scientists, conventional neurologists and CAM practitioners. It will promote the exploration of new areas of CAM research and lead research on CAM therapies for neurological disorders.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010881>

- **Preventing Cognitive Decline with Alternative Therapies**

Condition(s): Dementia; Memory Disorders

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Preventing dementia is an important goal for our aging population. This proposal is an initial 42 months study of the effect of standardized ginkgo biloba extract (GBE) on preventing or delaying cognitive decline in people age 85 years or older (the oldest old). The study focuses on the oldest old who present a distinct advantage for primary prevention studies because of their particularly high risk for developing mild cognitive impairment (MCI), a precursor to dementia. Because this is a population that has previously been out of the mainstream for use of **alternative medicine**, the safety of GBE in this age group will also be tested in this study. The study is randomized, placebo controlled and double blind. Approximately 200 elderly cognitively healthy subjects will be enrolled and followed for detection of conversion to MCI. This pilot study is viewed as a necessary first step in order to demonstrate that GBE, an alternative or complementary therapy, has a disease modifying effect on the brain, distinct from a symptomatic effect. The study will test the feasibility of the randomized start design, a trial design proposed as a method for discerning brain- or disease- modifying from symptomatic effects. The magnitude of biological effect of the treatments will also be assessed with volumetric quantitative MRI, a complementary means of confirming whether there is a brain modifying effect (measured as a decrease in brain volume loss with treatment). Peripheral markers of oxidation status will measure possible anti-oxidant effects of GBE.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010920>

- **Relaxation Response with Acupuncture for HIV Patients**

Condition(s): Human Immunodeficiency Virus; AIDS

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Advances in treatment has turned HIV/AIDS into a chronic illness. Relaxation response is a state in which individuals evoke a bodily calm, effecting physiological changes that are shown to be associated with improved immune functioning. **acupuncture** and relaxation are thought to both induce calm and deep relaxation in mind and body. This trial will study the combined effects of **acupuncture** and relaxation response in HIV patients.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00064740>

- **Sham Device, Pill Placebo or Treatment For Arm Pain**

Condition(s): Cumulative Trauma Disorders; Repetitive Strain Injury; Carpal Tunnel Syndrome; Pain

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This study investigates the role of two active interventions and their placebo effects in randomized control trials. The study conducts two parallel trials of treatments for upper extremity pain secondary to repetitive stress disorder, including carpal tunnel syndrome. The active interventions are amitriptyline and **acupuncture**. The placebo are sham **acupuncture** device and placebo pill.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00029497>
- **The Acupressure (Acupuncture Without Needles) Study**

Condition(s): HIV Infections

Study Status: This study is currently recruiting patients.

Sponsor(s): National Institute of Nursing Research (NINR)

Purpose - Excerpt: The purpose of this study is to see whether acupressure (acupuncture using pressure applied by the hands instead of needles) can help nausea and vomiting in persons with HIV/AIDS. This is a Phase I trial (a study to evaluate effectiveness in a small number of patients). Patients will get 4 acupressure treatments and will wear acupressure wristbands for 1 week. Patients will write down all drugs they take and will make a note of when they get nausea and vomiting. They also will give written answers to different questions. No drugs will be given as part of this study. Patients will be paid for participating.

Phase(s): Phase I

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00017823>
- **The Use of a Microdialysis/Acupuncture Needle to Assess the Local Tissue Milieu in Active and Latent Myofascial Trigger Points in the Upper Trapezius Muscle in Individuals With and Without Neck Pain**

Condition(s): Neck Pain

Study Status: This study is currently recruiting patients.

Sponsor(s): Warren G Magnuson Clinical Center (CC)

Purpose - Excerpt: Many adults suffer from neck pain of muscle origin (myofascial pain). Treatment depends on accurate diagnosis, which is often difficult. This study proposes to enroll 30 adults (men and women, ages 21 to 65) in three groups: 1. Healthy people without neck pain who have no myofascial trigger points (MTrPs) in the upper trapezius muscle 2. Healthy people without neck pain who have latent MTrPs as identified by palpation (touching) in the upper trapezius muscle 3. Healthy people who

have had neck pain for less than three months who have active MTrPs in the upper trapezius muscle. The researchers have treated myofascial pain by inserting an **acupuncture** needle into the tender part of the upper trapezius muscle. They theorize that the treatment works by physically disrupting the integrity of dysfunctional motor endplates in the muscle. They have devised a hollow needle whose diameter is no larger than that of an **acupuncture** needle. In this study, they will use the needle to draw small amounts of fluid from the muscle. They will use electrodes to compare the muscle responses of the three groups. They will analyze the chemical contents of the withdrawn fluids, such as electrolytes, muscle metabolites, inflammatory mediators, neurotransmitters, cytokines, and arachidonic acid derivatives. These substances are believed to play a critical role in the biochemistry and pathophysiology of soft tissue pain. The primary goal of the study is to learn whether this technique can successfully sample these chemicals, and whether the differences in amounts of these chemicals among the three groups will allow the researchers to advance understanding of the nature, diagnosis and treatment of myofascial pain.

Study Type: Observational

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00042276>

- **The Use of Reiki for Patients with Advanced AIDS**

Condition(s): Acquired Immunodeficiency Syndrome; HIV Infections

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This study will investigate the use of Reiki, an energy-based complementary and **alternative medicine** (CAM) intervention, as an approach to improve well-being for patients with advanced AIDS, and evaluate its effects on dimensions of well-being and quality of life.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00032721>

- **Usual Care Vs Choice of Alternative Rx: Low Back Pain**

Condition(s): Acute low back pain

Study Status: This study is currently recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This study compares two approaches to the management of acute low back pain: usual care (standard benefit) vs. the choice of: usual care, chiropractic, **acupuncture** or massage therapy (expanded benefit). 480 subjects with uncomplicated, acute low back pain will be recruited from a health maintenance organization, and randomized to either usual care (n=160) or choice of expanded benefits (n=320). Patients' preferences for individual therapies and expectations of improvement will be measured at baseline and throughout the study. Subjects randomized to the expanded benefits arm who choose chiropractic, **acupuncture** or massage will receive up to 10 treatments over a five-week period. Additional treatments will be available after the fifth week but will require a copayment. Treatments will be provided by licensed

providers who have met strict credentialing criteria. Chiropractic, **acupuncture** or massage treatments will begin within 48 hours. Chiropractic, **acupuncture** and massage therapy scope of practice guidelines for the treatment of acute low back pain have been developed as have detailed data tracking procedures to be used at each patient visit. Symptom relief, functional status, restricted activity days, use of health care, and patient and provider satisfaction will be assessed at 2, 5, 12, 26 and 52 weeks after initiation of treatment. Primary outcomes will include: 1) change in symptoms; 2) change in functional status; 3) patient satisfaction; and 4) total utilization of services associated with care for low back pain. Medical records and the HMO's cost management information system will identify use of services. It is hypothesized that patients offered their choice of expanded benefits will experience a more rapid improvement in symptoms, a faster return to baseline functional status, a decrease in utilization of conventional medical services, and will be more satisfied with their care. The study is a direct examination of the effectiveness of an insurance eligibility intervention, not a test of the efficacy of specific, non-allopathic treatment regimens. The results of this study will provide valuable information to clinicians, patients and third party payers on the relative benefits and costs of an "expanded benefits" treatment option which incorporates chiropractic, **acupuncture** and massage services for low back pain.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010985>

- **Acupuncture in Fibromyalgia**

Condition(s): Fibromyalgia; Pain

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Fibromyalgia is the second most common rheumatic disorder, affecting approximately 8-10 million persons in the U.S., and is characterized by widespread musculoskeletal pain and soft tissue tenderness upon examination. This study focuses on the use of **acupuncture** as a mode of therapy for fibromyalgia. The issues under examination are: 1) the optimal duration of treatment, 2) the independent and synergistic effects of needle placement and needle stimulation, and 3) appropriate control strategies. The proposal utilizes a randomized, blinded, sham-controlled design to achieve these aims. Subjects are randomly assigned to one of four groups: 1) active site with stimulation, 2) active site, without stimulation, 3) sham site with stimulation, and 4) sham site, without stimulation. All subjects will receive **acupuncture** at escalating frequency, beginning at once per week and ending at 3 times per week. This "forced titration" design allows for the detection of inter-subject differences in responsiveness to **acupuncture**, as well as the factors which may predict responsiveness (or lack thereof). Secondary goals of the study are to collect data on the mechanism, safety, and cost-effectiveness of **acupuncture** in fibromyalgia, and to determine the optimal outcome measures, for a full scale research clinical trial.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010504>

- **Acupuncture in the Treatment of Depression**

Condition(s): Depressive Disorders; Depression

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The current large randomized placebo-controlled trial is testing the ability of **acupuncture** to treat major depression. The study is unique in that treatment effects will be from the perspective of both Western psychiatry and Chinese medicine.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010517>

- **Adolescents' Use of Complementary and Alternative Medicine**

Condition(s): Healthy; MEDLINEplus consumer health information

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to help improve our understanding of when and why adolescents decide to use alternative and complimentary medicines, and to understand factors that lead to better communication between youth and their clinicians.

Study Type: Observational

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00032656>

- **Efficacy of Acupuncture in the Treatment of Fibromyalgia**

Condition(s): Fibromyalgia

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM); National Heart, Lung, and Blood Institute (NHLBI)

Purpose - Excerpt: Fibromyalgia (FM), one of the most common rheumatic conditions, is a condition of unknown etiology characterized by widespread muscle pain and stiffness. Treatment is generally unsatisfactory and most randomized, controlled treatment trials have been unable to demonstrate a sustained effective intervention. A single, brief trial of electroacupuncture demonstrated remarkable improvement among patients with FM, although lasting effects were not evaluated. Nonetheless, the recently published National Institutes of Health Consensus Development Statement on **acupuncture** says "musculoskeletal conditions such as fibromyalgia, myofascial pain....are conditions for which **acupuncture** may be beneficial". Thus, 96 patients will be recruited from a referral clinic for fatigue for a 12 week (24 treatments) trial. These patients will be randomized into 3 control groups and 1 "true" **acupuncture** group. The control groups will consist of a group receiving **acupuncture** treatment for an unrelated condition (morning sickness), a group receiving needle insertion at non-channel, non-point locations, and a "true" placebo group. This latter group will have **acupuncture** needle guides tapped on the skin, then needles tapped. Thus, the specific aims of this study are to 1) evaluate the

short and long term efficacy and side effects of a 12 week randomized, controlled trial of bi-weekly **acupuncture** in the treatment of FM; 2) establish the most useful and scientifically sound control group for studies of **acupuncture** using FM as a model for conditions characterized by chronic pain; 3) use both subjective and objective measures of overall health and pain to determine the optimal time length of treatment; and 4) examine the concordance of allopathic and acupuncture-based measures of outcome. For the purposes of this study, subjects will be asked to complete a unique set of study measures at enrollment, at 4, 8, and 12 weeks, and then again at 1 and 6 months post-treatment. Our primary outcomes will be patient global assessment, subjective pain, and mean number of tender points. Secondary outcomes will be pain threshold, analgesic use, physician global assessment, functional status, sleep, psychological distress, and fatigue. Thus, this trial will have both immediate and longer term implications for the scientific study of **acupuncture** as well as the clinical care of the estimated 5 million patients with FM in the US. From a methodological point of view, the proposed trial will establish the most appropriate methods for choosing a control group should larger trials be conducted, suggest the optimum duration of treatment, and evaluate the utility of diverse allopathic and alternative outcome measures. Of equal importance, however, this research will test and potentially establish the effectiveness of **acupuncture**.

Phase(s): Phase I

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010764>

- **Investigation of the Effect of Acupuncture Needling on Connective Tissue Using Ultrasound Elastography**

Condition(s): Healthy

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Center for Research Resources (NCRR)

Purpose - Excerpt: During **acupuncture** treatment, **acupuncture** needles are inserted and manipulated until a characteristic local tissue reaction termed "de qi" is observed. De qi can be perceived by the acupuncturist in the form of "needle grasp", a mechanical gripping of the needle by the tissue. De qi is considered essential to the therapeutic effect of **acupuncture**. Therefore, the investigator proposes that understanding this local tissue reaction will lead to an understanding of how the therapeutic effect of **acupuncture** therapy arises. Specifically, it is hypothesized that needle manipulation causes winding of collagen and elastic fibers around the needle. This action induces tension in the collagen network surrounding the needling site and results in a mechanical signal that is transduced into local cells. The objective of the current work is to use ultrasound elastography, a recently developed ultrasound imaging technique, to visualize and quantify changes in the elastic properties of skin and subcutaneous tissue in 12 healthy human volunteers as a result of **acupuncture** needle manipulation.

Study Type: Observational

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00005770>

- **Saw Palmetto Extract in Benign Prostatic Hyperplasia**

Condition(s): Benign Prostatic Hyperplasia

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK); National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to test whether an extract of the saw palmetto plant is effective for relieving symptoms of Benign Prostatic Hyperplasia (BPH).

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00037154>

- **The Efficacy of a Standardized Acupuncture Regimen and Amitriptyline Compared With Placebo as a Treatment for Pain Caused by Peripheral Neuropathy in HIV-Infected Patients**

Condition(s): HIV Infections; Peripheral Nervous System Disease

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Institute of Allergy and Infectious Diseases (NIAID)

Purpose - Excerpt: To evaluate the separate and combined efficacy of a standardized **acupuncture** regimen and amitriptyline on the relief of pain due to peripheral neuropathy and on the quality of life of HIV-infected patients. Both amitriptyline, an antidepressant, and **acupuncture**, a Chinese medical approach that uses needles to relieve pain, have been used successfully to reduce pain in some people. It is not known how effectively these approaches relieve or reduce pain in patients with peripheral neuropathy secondary to HIV infection.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00000817>

- **Use of Acupuncture for Dental Pain: Testing a Model**

Condition(s): Tooth, Impacted

Study Status: This study is no longer recruiting patients.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM); National Institute of Dental and Craniofacial Research (NIDCR)

Purpose - Excerpt: This study is testing the safety and effectiveness of **acupuncture** in controlling pain related to the removal of partially impacted mandibular third molars. **acupuncture** is the Chinese art of healing by inserting needles into the skin. Participants ages 18 - 40 are given an initial x-ray to determine if one lower molar is partially bony impacted. Eligible participants will then undergo standard oral surgery to remove the impacted molar. A local anesthetic will be used prior to surgery. Directly after surgery the participant will be assigned to one of three groups. Participants will not be able to select which group they are assigned. Participants will receive either real or sham (fake) **acupuncture** as a treatment for post-extraction pain. After the initial **acupuncture** treatment, participants are required to remain for six hours at the dental site to be monitored. If a participant's discomfort is measured as moderate or higher then a second **acupuncture** treatment will be administered. All participants will be administered

questionnaires during the day of surgery. Participants will also be required to complete two diaries during the seven days following surgery. On the seventh day, participants return to have stitches removed and hand in completed diaries.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010972>

- **Acupuncture and Herbal Treatment of Chronic HIV Sinusitis**

Condition(s): HIV Infections; Sinusitis

Study Status: This study is completed.

Sponsor(s): Immune Enhancement Project

Purpose - Excerpt: To compare Traditional Chinese Medicine versus standard antibiotic therapy consisting of pseudoephedrine (Sudafed) plus amoxicillin / clavulanate potassium combination (Augmentin) in reducing symptoms and recurrence of acute HIV-related sinusitis. Chronic sinusitis in HIV-infected individuals is a recurrent and persistent infection with potentially serious complications: it can exacerbate pulmonary disease, cause recurrences of life-threatening sepsis, and progress to central nervous system involvement. Symptoms of sinusitis in HIV patients are often refractory to aggressive Western medical management, and antibiotic intolerance can occur. Traditional Chinese Medicine consisting of **acupuncture** and herbal treatment may provide a low-risk, low-cost alternative to conventional antibiotic therapy.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00002149>

- **Acupuncture for Carpal Tunnel Syndrome**

Condition(s): Carpal Tunnel Syndrome

Study Status: This study is completed.

Sponsor(s): National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)

Purpose - Excerpt: This study will look at the effectiveness of **acupuncture** for treating carpal tunnel syndrome (CTS). People who participate in this study will have CTS that has been diagnosed by physical examination and neurological testing. We will randomly assign study participants to receive one of the three types of **acupuncture** either once, twice, or three times weekly for a total of 6 weeks. Acupuncturists will treat one group of patients with true **acupuncture**. They will give the other two groups of patients one of two alternative **acupuncture** treatments that do not use the true **acupuncture** points. The patients and evaluators will not know the type of **acupuncture** (True, Alternative 1, or Alternative 2) that is being used. The acupuncturists will not communicate with the patients and will not be involved in patient evaluation.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00000394>

- **Acupuncture to prevent postoperative bowel paralysis (paralytic ileus)**

Condition(s): Colostomy; Ileostomy; Bowel Cancer; Postoperative Paralytic Ileus

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to determine if **acupuncture** is effective in preventing prolonged postoperative paralysis of the gastrointestinal tract among patients undergoing colostomy/ileostomy closure.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00065234>

- **Acupuncture vs. Placebo in Irritable Bowel Syndrome**

Condition(s): Irritable Bowel Syndrome

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: Little is known about acupuncture's efficacy for Irritable Bowel Syndrome (IBS). This trial uses a manualized **acupuncture** treatment format that closely follows clinical practice and allows flexibility in designing individualized treatments. In addition, a second parallel qualitative study will follow a subgroup of patients throughout the trial to explore the relationships between patients' interpretations and understandings (what anthropologists call "meaning") of irritable bowel and their response to treatment. Cortisol levels (an important stress hormone) will also be assessed.

Phase(s): Phase I; Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00065403>

- **Biomarkers of Homeopathy in Fibromyalgia**

Condition(s): Fibromyalgia

Study Status: This study is completed.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to evaluate the efficacy of individualized classical **homeopathy** in treatment of persons with fibromyalgia and to determine the usefulness of electroencephalographic and electrocardiographic measures to serve as markers of differences between active and placebo treatment.

Phase(s): Phase I; Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00065702>

- **Effects of Herbal Antioxidants on cardiovascular disease in Older Blacks**

Condition(s): Cardiovascular Diseases

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM); National Heart, Lung, and Blood Institute (NHLBI); National Institute on Aging (NIA)

Purpose - Excerpt: Older African Americans suffer from disproportionately high rates of cardiovascular disease (CVD) morbidity and mortality. In response to the health disparity between older African Americans and whites, national mandates have called for new research on innovative approaches to CVD prevention in this high risk population. Oxidative stress has recently been implicated in the pathogenesis of atherosclerotic CVD. Available evidence from epidemiological studies, clinical trials, and laboratory mechanistic studies indicate that antioxidant interventions may be useful in the prevention and treatment of atherosclerotic CVD in high risk older populations. Furthermore, it has been hypothesized that dietary or food sources of antioxidant nutrients may be more clinically effective than conventional nonfood-derived vitamin supplementation. Surveys indicate relatively high rates of complementary and **alternative medicine** (CAM) use, including herbal medicines, in older African Americans. Yet, with the exception of the previous clinical trials of the present Center team, there have been few controlled studies on CAM therapies in older African Americans and no previous controlled studies on efficacy and mechanisms of herbal antioxidants for the prevention of CVD in this high risk population. Preliminary studies have found that a CAM herbal preparation (MAK) derived from traditional Vedic medicine demonstrates potent antioxidant and anti-atherogenic effects in laboratory and pilot human studies. Therefore, the overall goal of the proposed study is to evaluate the effects of this traditional CAM herbal preparation compared to conventional nonfood-derived vitamin supplementation and placebo on pathophysiological markers of CVD in high risk older African Americans.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00010725>

- **Efficacy of Acupuncture for Chronic Low Back Pain**

Condition(s): Low Back Pain

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This is a trial to clarify the extent to which **acupuncture** needling can diminish the effect of chronic back pain on patient functioning and symptoms.

Phase(s): Phase III

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00065585>

- **Endometriosis : Traditional Medicine vs Hormone Therapy**

Condition(s): Endometriosis; Pelvic Pain

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This 12-week study will determine whether traditional Chinese medicine (acupuncture and Chinese herbs) is as effective as hormone therapy for alleviating endometriosis-related pelvic pain.

Phase(s): Phase I; Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00034047>

- **Intravenous micronutrient therapy (IVMT) for Fibromyalgia**

Condition(s): Fibromyalgia

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to determine if intravenous micronutrient therapy (IVMT) is effective in the treatment of fibromyalgia, as assessed by validated functional and pain measures.

Phase(s): Phase I; Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00067405>

- **Physical CAM Therapies for Chronic Low Back Pain**

Condition(s): Chronic Low Back Pain

Study Status: This study is completed.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: This is a pilot randomized trial intended to evaluate the effectiveness of **acupuncture**, chiropractic and massage for chronic back pain in older and younger adults.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00065975>

- **Prospective Studies of the Use of Self Hypnosis, Acupuncture and Osteopathic Manipulation on Muscle Tension in Children with Spastic Cerebral Palsy**

Condition(s): Spastic Cerebral Palsy

Study Status: This study is not yet open for patient recruitment.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: We propose to identify patients and families for inclusion in pilot studies of the three modalities. Patients and their families will be asked to participate in these studies. Our research group has done some preliminary work with the modality of hypnotherapy, but has no experience to date with the other two modalities. The idea to try relaxation techniques was generated by the observation that there is great variation in the degree to spasticity at different times in the same patient with CP. When queried, mothers responded that they were able to get their child to relax and decrease the tension in their muscles by stroking, talking softly, and/or by playing certain types of music. The availability of hypnosis and training in self-hypnosis was presented to several families of our patients. Their understanding and acceptance of this alternate therapy was gratifying. The results of this therapy have been promising and have encouraged us to proceed with this modality and to consider making other nonconventional modalities available to our patients. We hypothesize that at least one of the three modalities will be accepted readily by patients with CP and their families, and with their acceptance compliance with the method chosen will be at levels of 80 percent or more.

Phase(s): Phase II

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00011024>

- **Treatment of Major Depression with St. John's Wort (Hypericum)**

Condition(s): Major Depression

Study Status: This study is completed.

Sponsor(s): National Institute of Mental Health (NIMH); National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this trial is to study the acute efficacy and safety of a standardized extract of the herb *Hypericum perforatum* (St. John's Wort), called hypericum for purposes of this trial, in the treatment of patients with major depression. Clinical depression is a serious medical disorder that can be debilitating and can lead to suicide. There is growing public interest in claims that hypericum may be an effective treatment for depression. Although it is widely prescribed in Europe, no studies of its long-term use have been conducted, and published studies have treated different types of patients and have used several different doses. The toxicity and side effects of hypericum appear to be substantially less than those of standard tricyclic antidepressant medications, and thus hypericum may be more acceptable to patients. In addition, the cost is significantly less than standard antidepressant medications. Published studies assessed acute efficacy and lasted between 4 and 12 weeks (most being 4-6 weeks). The longer-term effects of hypericum have not been evaluated. There is a need for a large-scale, controlled clinical trial to assess whether Hypericum has a significant therapeutic effect in patients with clinical depression. Patients are assigned randomly (like tossing a coin) to receive St. John's wort, Sertraline (Zoloft), or a placebo (sugar pill) for 8 weeks. This is a double-blind study, meaning neither the patient nor the doctor will know which treatment is being assigned. Patients who respond well to the treatment will continue on the assigned treatment for an additional 4 months. Patients will have regular follow-up visits to monitor their symptoms and any side effects they experience.

Study Type: Interventional

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00005013>

- **Women's Use of Alternative Medicine: A Multiethnic Study**

Condition(s): Uterine Fibroids; Osteoporosis; Urinary Tract Infection; High Blood Pressure; Heart Disease; Arthritis; Depression; Headaches

Study Status: This study is completed.

Sponsor(s): National Center for Complementary and Alternative Medicine (NCCAM)

Purpose - Excerpt: The purpose of this study is to examine socio-cultural factors of women's use of complementary and **alternative medicine** (CAM). The effects of socioeconomic status, social networks and acculturation on CAM use will be assessed among white, African-, Mexican-, and Chinese-American women.

Study Type: Observational

Contact(s): see Web site below

Web Site: <http://clinicaltrials.gov/ct/show/NCT00067249>

Keeping Current on Clinical Trials

The U.S. National Institutes of Health, through the National Library of Medicine, has developed ClinicalTrials.gov to provide current information about clinical research across the broadest number of diseases and conditions.

The site was launched in February 2000 and currently contains approximately 5,700 clinical studies in over 59,000 locations worldwide, with most studies being conducted in the United States. ClinicalTrials.gov receives about 2 million hits per month and hosts approximately 5,400 visitors daily. To access this database, simply go to the Web site at <http://www.clinicaltrials.gov/> and search by "alternative medicine" (or synonyms).

While ClinicalTrials.gov is the most comprehensive listing of NIH-supported clinical trials available, not all trials are in the database. The database is updated regularly, so clinical trials are continually being added. The following is a list of specialty databases affiliated with the National Institutes of Health that offer additional information on trials:

- For clinical studies at the Warren Grant Magnuson Clinical Center located in Bethesda, Maryland, visit their Web site: <http://clinicalstudies.info.nih.gov/>
- For clinical studies conducted at the Bayview Campus in Baltimore, Maryland, visit their Web site: <http://www.jhbmc.jhu.edu/studies/index.html>
- For cancer trials, visit the National Cancer Institute: <http://cancertrials.nci.nih.gov/>
- For eye-related trials, visit and search the Web page of the National Eye Institute: <http://www.nei.nih.gov/neitrials/index.htm>
- For heart, lung and blood trials, visit the Web page of the National Heart, Lung and Blood Institute: <http://www.nhlbi.nih.gov/studies/index.htm>
- For trials on aging, visit and search the Web site of the National Institute on Aging: <http://www.grc.nia.nih.gov/studies/index.htm>
- For rare diseases, visit and search the Web site sponsored by the Office of Rare Diseases: http://ord.aspensys.com/asp/resources/rsch_trials.asp

- For alcoholism, visit the National Institute on Alcohol Abuse and Alcoholism: http://www.niaaa.nih.gov/intramural/Web_dicbr_hp/particip.htm
- For trials on infectious, immune, and allergic diseases, visit the site of the National Institute of Allergy and Infectious Diseases: <http://www.niaid.nih.gov/clintrials/>
- For trials on arthritis, musculoskeletal and skin diseases, visit newly revised site of the National Institute of Arthritis and Musculoskeletal and Skin Diseases of the National Institutes of Health: <http://www.niams.nih.gov/hi/studies/index.htm>
- For hearing-related trials, visit the National Institute on Deafness and Other Communication Disorders: <http://www.nidcd.nih.gov/health/clinical/index.htm>
- For trials on diseases of the digestive system and kidneys, and diabetes, visit the National Institute of Diabetes and Digestive and Kidney Diseases: <http://www.niddk.nih.gov/patient/patient.htm>
- For drug abuse trials, visit and search the Web site sponsored by the National Institute on Drug Abuse: <http://www.nida.nih.gov/CTN/Index.htm>
- For trials on mental disorders, visit and search the Web site of the National Institute of Mental Health: <http://www.nimh.nih.gov/studies/index.cfm>
- For trials on neurological disorders and stroke, visit and search the Web site sponsored by the National Institute of Neurological Disorders and Stroke of the NIH: http://www.ninds.nih.gov/funding/funding_opportunities.htm#Clinical_Trials

CHAPTER 6. PATENTS ON ALTERNATIVE MEDICINE

Overview

Patents can be physical innovations (e.g. chemicals, pharmaceuticals, medical equipment) or processes (e.g. treatments or diagnostic procedures). The United States Patent and Trademark Office defines a patent as a grant of a property right to the inventor, issued by the Patent and Trademark Office.⁹ Patents, therefore, are intellectual property. For the United States, the term of a new patent is 20 years from the date when the patent application was filed. If the inventor wishes to receive economic benefits, it is likely that the invention will become commercially available within 20 years of the initial filing. It is important to understand, therefore, that an inventor's patent does not indicate that a product or service is or will be commercially available. The patent implies only that the inventor has "the right to exclude others from making, using, offering for sale, or selling" the invention in the United States. While this relates to U.S. patents, similar rules govern foreign patents.

In this chapter, we show you how to locate information on patents and their inventors. If you find a patent that is particularly interesting to you, contact the inventor or the assignee for further information. **IMPORTANT NOTE:** When following the search strategy described below, you may discover non-medical patents that use the generic term "alternative medicine" (or a synonym) in their titles. To accurately reflect the results that you might find while conducting research on alternative medicine, we have not necessarily excluded non-medical patents in this bibliography.

Patents on Alternative Medicine

By performing a patent search focusing on alternative medicine, you can obtain information such as the title of the invention, the names of the inventor(s), the assignee(s) or the company that owns or controls the patent, a short abstract that summarizes the patent, and a few excerpts from the description of the patent. The abstract of a patent tends to be more technical in nature, while the description is often written for the public. Full patent descriptions contain much more information than is presented here (e.g. claims, references, figures, diagrams, etc.).

⁹Adapted from the United States Patent and Trademark Office:
<http://www.uspto.gov/web/offices/pac/doc/general/whatis.htm>.

Patent Applications on Alternative Medicine

As of December 2000, U.S. patent applications are open to public viewing.¹⁰ Applications are patent requests which have yet to be granted. (The process to achieve a patent can take several years.) The following patent applications have been filed since December 2000 relating to alternative medicine:

- **Billing process for botanicals, supplements and homeopathic remedies**

Inventor(s): Giannini, Jo Melinna ; (Las Cruces, NM)

Correspondence: Richard C. Litman; LITMAN LAW OFFICES, LTD.; P.O. Box 15035; Arlington; VA; 22215; US

Patent Application Number: 20010034616

Date filed: April 20, 2001

Abstract: A business method for billing customers for alternative botanical, supplemental and homeopathic remedies by electronically creating unique codes for these remedies and an electronic connection to the universal product codes and the national drug codes.

Excerpt(s): This application claims the benefit of U.S. Provisional Patent Application Serial No. 60/198,757, filed Apr. 21, 2000. ... The present invention relates generally to information and billing for nutraceuticals. More specifically, the invention is a business method for billing customers for alternative remedies such as botanicals, supplements and homeopathic remedies, and electronically creates unique codes for these remedies and an electronic connection to the universal product codes and the national drug codes to track the efficacy of these products when used to treat patients for specific health items. ... The relevant art of interest describes various business methods concerning the billing process, but none discloses the present method. There is a need for connecting the Universal Product Code (UPC) and the National Drug Code (NDC) to couple the dosage, the number of units, and the like information of a product to the patient encounter as expressed in electronically coded claims and paper claim forms. In addition, the pairing of these codes would automatically connect a product to the diagnosis of a patient, capture data for assessing the patient's outcome, allow the product to be billed as part of the treatment, and would tie to the legal references within the context of the state laws governing the providers able to prescribe, recommend or distribute these products.

Web site: <http://appft1.uspto.gov/netathtml/PTO/search-bool.html>

- **Homeopathic compositions for the treatment of viral and metabolic diseases**

Inventor(s): Etienne, Marie-Christine ; (Tassin La Demi Lune, FR)

Correspondence: Richard E. Fichter; BACON & THOMAS, PLLC; Fourth Floor; 625 Slaters Lane; Alexandria; VA; 22314; US

Patent Application Number: 20020025314

Date filed: April 23, 2001

¹⁰ This has been a common practice outside the United States prior to December 2000.

Abstract: A method for causing the elimination of an active principle, R, from cells of a mammal which contain the active principle, R, which comprises administering to said mammal, a compound identical in nature to said active principle in a homeopathic product of the formula RxCH, in which R is the active principle and in which xCH is a homeopathic dilution of said active ingredient R to eliminate R from the cells to restore normal function to the perturbed pericellular transport systems.

Excerpt(s): This application is a Continuation-in-part of co-pending application Ser. No. 09/239,698, filed Jan. 29, 1999 (of which the entire disclosure of the pending, prior application is hereby incorporated by reference), which is a continuation of application Ser. No. 08/831,884, filed May 9, 1995, and which application is a 371 of PCT/FR92/00813, filed Aug. 21, 1992. ... In the prior art, the therapeutic use of homeopathic remedies consists in causing a series of symptoms to disappear in a diseased individual by administering a homeopathic dilution of the substance which has been able to cause the same symptoms in a healthy subject. ... The present invention concerns the use of a homeopathic product for the preparation of a medicament intended to bring about the elimination from the cells which contain it of a compound that is identical in nature to the active principle in the specific case in which said elimination result in restoring the normal operation of the pericellular transport systems which are disturbed.

Web site: <http://appft1.uspto.gov/netahtml/PTO/search-bool.html>

- **Homeopathic medicine comprising one or several mother-of-pearl constituents including bio-aragonite**

Inventor(s): Lablanchy, Jean-Pierre ; (Paris, FR)

Correspondence: James C. Lydon; Suite 100; 100 Daingerfield Road; Alexandria; VA; 22314; US

Patent Application Number: 20020160051

Date filed: February 26, 2001

Abstract: A homeopathic medicine which includes at least biocompatible mother-of-pearl bio-aragonite. The medicine is used for treating pain of bone origin and in particular related to bone diseases cause by a pathology, pre-menopause or post-menopause estrogenic deficiency, ageing, cancer or trauma and to cartilaginous disorders, particularly osteoarthritis.

Excerpt(s): The present invention relates to a homeopathic medication comprising one or several mother-of-pearl constituents, including bio-aragonite. It also relates to a process for manufacturing this medication. ... Within the context of the present invention, the expression "homeopathic medication" refers to a medication that is administered at low doses, in comparison with those administered using allopathy techniques, that is, with minimal dilution of the mother tincture of 1DH (one tenth potency). ... Mother-of-pearl, or chonchylifere aragonite, is a biogenous mineralized formation, comprised mainly of a mineral part consisting of crystallized calcium carbonate in the form of aragonite and essentially of an organic matrix of fibrous and non-fibrous substances, representing approximately 1 to 2% of the total weight. The mother-of-pearl is obtained from marine mollusk shells, namely certain oysters such as *Pinctada maxima*, for which it makes up the most internal layer.

Web site: <http://appft1.uspto.gov/netahtml/PTO/search-bool.html>

- **Homeopathic preparations**

Inventor(s): Brewitt, Barbara A. ; (Seattle, WA)

Correspondence: SPECHMAN LAW GROUP; 1501 WESTERN AVE; SUITE 100;
SEATTLE; WA; 98101; US

Patent Application Number: 20020071873

Date filed: May 29, 2001

Abstract: The present invention comprises homeopathic preparations of a purified growth factor, as well as methods and systems for delivery of such preparations and treatment of disorders and conditions by administering such preparations.

Excerpt(s): This application is a continuation of U.S. patent application Ser. No. 09/251,820, filed Feb. 17, 1999, issued May 29, 2001 as U.S. Pat. No. 6,239,105, which is a continuation-in-part of prior U.S. patent application Ser. No. 08/855,096 filed May 13, 1997, issued Feb. 15, 2000 as U.S. Pat. No. 6,024,734, which is a continuation-in-part of prior U.S. patent application Ser. No. 08/710,040 filed Sep. 10, 1996, issued May 13, 1997 as U.S. Pat. No. 5,629,286, which is a continuation of U.S. patent application Ser. No. 08/488,722, filed Jun. 8, 1995, now abandoned, which is a continuation-in-part of U.S. patent application Ser. No. 08/221,365 filed Mar. 31, 1994, now abandoned. Each of these applications and U.S. patents is incorporated herein by reference in its entirety. ... This invention relates to homeopathic preparations comprising purified growth hormone, as well as methods and systems for delivery of such preparations and treatment of disorders and conditions by administering such preparations. ... Hormones and polypeptide growth factors are important regulatory substances that are involved in the regulation of cell growth and differentiation, as well as in the control of specific metabolic processes. Hormones are defined as chemical messengers that are synthesized in the endocrine glands and secreted into extracellular body fluids. Hormones are transported to hormone-responsive cells, where they bind to a hormone receptor, and the hormone-receptor complex regulates and modulates differentiated functions. Polypeptide growth factors are produced and secreted by cells from a variety of tissues, and are generally involved in paracrine and autocrine responses. Growth factors are involved in cell survival and play a crucial role in the control mechanisms governing the development and maintenance of organs and tissues. In addition to their growth promoting and differentiation inducing effects, growth factors are also involved in important physiological processes such as inflammation, immune reactions, and tissue repair.

Web site: <http://appft1.uspto.gov/netahtml/PTO/search-bool.html>

- **Method of and apparatus for registering and reproducing homeopathic information**

Inventor(s): Dillinger, Klaus ; (St. Polten, AT), Steiner, Christian ; (Viktring, AT)

Correspondence: THE FIRM OF KARL F ROSS; 5676 RIVERDALE AVENUE; PO BOX 900; RIVERDALE (BRONX); NY; 10471-0900; US

Patent Application Number: 20020059247

Date filed: June 28, 2001

Abstract: Homeopathic information in the form of electromagnetic spectra or combinations of spectra or spectra sums are downloaded through a global

communication network from a site to a terminal and are used to produce homeopathic medicaments or test substances or for treatment of the patient. The homeopathic data is stored and reproduced by music storage and communication formats, especially MP3.

Excerpt(s): Our present invention relates to a method of registering and reproducing homeopathic information and to an apparatus for that purpose utilizing the digitalization of an analog electromagnetic spectrum and the recordal of the digitalized spectrum in an appropriate data storage medium, especially an electronic storage medium of a data processor. ... The invention also relates to a method of reproducing homeopathic information in the form of electromagnetic oscillations whereby one or more spectra which can be substance-specific or body-specific in the homeopathic sense can be selected from a multiplicity of such spectra stored in a storage medium and downloaded to a data processor from which the spectra or a spectrum can be converted into an analog signal, amplified and applied, preferably by at least one electrode or antenna in a homeopathic sense. This application of electromagnetic oscillations in a homeopathic sense can be used for treatment or for the production of homeopathic medicaments and test substances. ... The invention also relates to a device for reproducing homeopathic information in the form of such electromagnetic oscillations and which can include the storage medium, a digital to analog (D/A) converter and a device for-applying the electromagnetic oscillations.

Web site: <http://appft1.uspto.gov/netahtml/PTO/search-bool.html>

- **Method of characterizing a homeopathic preparation**

Inventor(s): Kay, Robert A. ; (Brea, CA), Bankaitis-Davis, Danute M. ; (Longmont, CO)

Correspondence: Ronald J. Baron, Esq.; HOFFMANN & BARON, LLP; 6900 Jericho Turnpike; Syosset; NY; 11791; US

Patent Application Number: 20030022206

Date filed: May 15, 2002

Abstract: A method is provided for obtaining a measure characteristic of a homeopathic preparation that affects the expression of at least one gene, the method comprising contacting the preparation with a gene in a gene expression system; and measuring the level of expression of the gene; wherein the level of expression constitutes the measure characteristic of the contents of the preparation.

Excerpt(s): This invention relates to obtaining a measure characteristic of a homeopathic preparation by measuring the bioactivity. More specifically, this invention provides novel methods of a reproducible, qualitative, biologically relevant characterization of homeopathic preparations useful in all aspects of development, manufacture and use, requiring characterization. The primary and immediate uses will be for research and improving the quality control of homeopathic preparations by contacting the drug with a gene expression system and measuring the amount of gene expression. ... Although some of the basic ideas of homeopathy can be dated back to ancient Greek and Roman times, homeopathy as it is presently known is considered to have been originated by Samuel Christian Hahnemann (1755-1843). ... Hahnemann, a chemistry and medical student at the Universities of Leipzig, Berlangen, and Vienna (ultimately qualifying as a doctor in 1779), became increasingly disillusioned with conventional medical practice and eventually gave up being a doctor to work as a translator. During his work as a translator, Hahnemann came across a passage about the ability of quinine purified from the bark of the cinchona tree to treat malaria. Upon further investigation, Hahnemann

decided to dose himself with quinine and record the results. Surprisingly, Hahnemann discovered that he began to develop the symptoms of malaria.

Web site: <http://appft1.uspto.gov/netahtml/PTO/search-bool.html>

- **System for administering provings of homeopathic remedies**

Inventor(s): Herscu, Paul ; (Amherst, MA)

Correspondence: Choate, Hall & Stewart; Exchange Place; 53 State Street; Boston; MA; 02109; US

Patent Application Number: 20020010391

Date filed: July 17, 2001

Abstract: A computer-based system for conducting homeopathic provings. The provers may be located remotely from the proving administrator, and may enter symptom information via the internet. Provers are preferably supervised by a local homeopath, and enter symptom information categorized by repertory and materia medica chapter. Also included is a system for supplying homeopathic repertory and/or materia medica information wherein users can store and share their own notes and changes to the homeopathic information, and a subscription system for accessing the homeopathic information, which may include clinical data and other supplementary materials.

Excerpt(s): The present invention claims benefit of priority from U.S. Provisional Application No. 60/219,295, filed Jul. 19, 2001, which is incorporated herein by reference. ... The present invention relates to a method of conducting homeopathic provings, and to a system for accessing and updating proving, materia medica, and repertory information for homeopathic medical treatment. ... Homeopathy was developed by Samuel Hahnemann in 1790. While he was translating a materia medica from English into German, he came across a reference that the prevalent prescription for malaria at that time was cinchona bark. The reason stated for its efficacy was that it was quite bitter. Dr. Hahnemann was well versed in the current use of medicine and decided there must be another reason besides its bitter qualities that made it work. He reasoned that other medicines were bitter but were not useful in the treatment of malaria. To prove his point, he experimented on himself by taking cinchona bark and observed the effect. Within a short time he experienced chills, fever, palpitations, sweats, in short, all the symptoms of malaria. He wrote down these effects in the text that he was translating as a footnote.

Web site: <http://appft1.uspto.gov/netahtml/PTO/search-bool.html>

Keeping Current

In order to stay informed about patents and patent applications dealing with alternative medicine, you can access the U.S. Patent Office archive via the Internet at the following Web address: <http://www.uspto.gov/main/patents.htm>. Under "Services," click on "Search Patents." You will see two broad options: (1) Patent Grants, and (2) Patent Applications. To see a list of granted patents, perform the following steps: Under "Patent Grants," click "Quick Search." Then, type "alternative medicine" (or synonyms) into the "Term 1" box. After clicking on the search button, scroll down to see the various patents which have been granted to date on alternative medicine. You can also use this procedure to view pending patent applications concerning alternative medicine. Simply go back to the following Web

address: <http://www.uspto.gov/main/patents.htm>. Under "Services," click on "Search Patents." Select "Quick Search" under "Patent Applications." Then proceed with the steps listed above.

CHAPTER 7. BOOKS ON ALTERNATIVE MEDICINE

Overview

This chapter provides bibliographic book references relating to alternative medicine. In addition to online booksellers such as www.amazon.com and www.bn.com, excellent sources for book titles on alternative medicine include the Combined Health Information Database and the National Library of Medicine. Your local medical library also may have these titles available for loan.

Book Summaries: Federal Agencies

The Combined Health Information Database collects various book abstracts from a variety of healthcare institutions and federal agencies. To access these summaries, go directly to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. You will need to use the "Detailed Search" option. To find book summaries, use the drop boxes at the bottom of the search page where "You may refine your search by." Select the dates and language you prefer. For the format option, select "Monograph/Book." Now type "alternative medicine" (or synonyms) into the "For these words:" box. You should check back periodically with this database which is updated every three months. The following is a typical result when searching for books on alternative medicine:

- **Dictionary of alternative medicine**

Source: Stamford, CN: Appleton and Lange. 1997. 407 pp.

Contact: Available from Appleton and Lange, Four Stamford Plaza, P. O. Box 120041, Stamford, CT 06912-0041 / Web site: <http://www.appletonlange.com>. \$29.95.

Summary: This illustrated dictionary gives definitions of terms, slang, and acronyms in the field of alternative medical treatment.

- **Alternative Medicine Yellow Pages: The Comprehensive Guide to the New World of Health**

Contact: Future Medicine Publishing, 10124 18th Ct E, Puyallup, WA, 98371, (206) 952-1130.

Summary: This book is a resource directory for consumers interested in contacting alternative medicine health care practitioners in the United States and Canada. The book resembles a typical telephone yellow pages, and contains telephone and address listings for scores of practitioners, organized by type of therapy and specialty, and by state. The book begins with an overview of alternative medicine, and common factors that can contribute to a patient's wellbeing. It advocates the use of alternative medicine and predicts that it will become the primary medical approach in the future.

- **Alternative Medicine: The Definitive Guide**

Contact: Future Medicine Publishing, 10124 18th Ct E, Puyallup, WA, 98371, (206) 952-1130.

Summary: This manual provides extensive information on alternative therapies and treatments for a range of health conditions, including HIV/AIDS. Part One gives the reader current information about alternative medicine, and discusses the relationship between homeostasis, stress adaptation, and illness. It provides helpful hints on how to select appropriate treatments. Part One also discusses medical freedom and the politics of health care, focusing on regulations by the FDA, medical establishments, and state medical boards. Part Two defines the practice of various alternative therapies, and their benefits. The manual discusses flower remedies, guided imagery, juice therapy, Qigong, and sound therapy. Each health condition reference suggests appropriate uses for the treatment; lists helpful hints; identifies treatment variations; notes related treatments; provides recommendations for treatments at home; comments on the future of the particular treatment; and refers to additional sources of information. The third part of the manual discusses a number of health conditions, such as AIDS, cancer, heart disease, stress, chronic fatigue syndrome, STDs, respiratory conditions, and vision disorders. Additional information is provided for other health problems, such as hair loss, muscular cramps, bruises, and frostbite. Illustrations of body systems and a glossary are also included. Appendices provide a list of antibiotics and probiotics.

- **American Holistic Health Association Complete Guide to Alternative Medicine**

Source: New York, NY: Warner Books. 1996. 361 p.

Contact: Available from Warner Books. 1271 Avenue of the Americas, New York, NY 10020. (212) 522-7200. PRICE: \$14.99. ISBN: 0446672580.

Summary: This book presents an overview of eight methods of alternative medicine. The American Holistic Health Association emphasizes that the goal of the book is to promote health and well-being through personal responsibility, considering the whole person (physical, emotional, mental, spiritual), wellness-oriented lifestyle choices, and active participation in personal health decisions and healing. The author covers Chinese medicine, Ayurveda, naturopathic medicine, homeopathy, mind and body medicine, osteopathic medicine, chiropractic, and massage therapy. Each chapter describes the techniques under discussion, explains the training undertaken by practitioners of the technique, describes the principles underlying the treatment, and discusses scientific support, patient satisfaction, strengths and limitations, costs, and choosing a practitioner. Each chapter also includes numerous sidebars describing individual experiences with that type of health care. References are included and a subject index concludes the text. (AA-M).

- **Chinese Medicine: The Role of Acupuncture and Herbs. First International Conference on Traditional and Complementary Therapies in the Prevention and Treatment of AIDS; Washington, D.C., February**

Contact: Institute for Learning Mastery, PO Box 314, Baltimore, MD, 21203, (410) 366-7373.

Summary: This sound recording presentation given at the First International Conference on Traditional and Complementary Therapies in the Prevention and Treatment of AIDS, held in Washington, D.C. on February 17 - 19, 1989, deals with the role of acupuncture and Chinese herbal medicine in controlling the Human immunodeficiency virus (HIV) and Acquired immunodeficiency syndrome (AIDS). The speaker begins by explaining how to find such a therapist in the United States. Chinese medicine is a way of looking at health. Meditation, acupuncture, herbs, and massage are some of the techniques used by its practitioners. Acupuncture and herbs do not cure, but they enhance the immune system. They work as a complementary therapy to Western methods and the two together make AIDS and HIV manageable chronic viral infections. Several acupuncture patients describe their experiences and the speaker tells the story of her own successful recovery from paralysis because of acupuncture.

- **The complete book of dental remedies: A guide to safe and effective relief from the most common dental problems using homeopathy, nutritional supplements, herbs, and conventional dental care**

Source: Garden City Park, NY: Avery Publishing Group. 1995. 220 pp.

Contact: Available from Avery Publishing Group, 350 Thorens Avenue, Garden City Park, NY 11040. Telephone: (516) 741-2155 or (800) 548-5757. \$14.36.

Summary: This book is written to educate the general public about oral health and conventional and alternative methods of maintaining healthy teeth and gums. Part one topics include the jaw and oral cavity, the basics of hygiene, diet and nutrition, homeopathy, herbal therapy, and how to choose a dentist. The second part describes common dental disorders, with suggested methods of therapies, whether conventional, homeopathic, herbal, or other recommendations. Part three discusses specific treatment techniques and commonly used tools. The book closes with a glossary, listing of dental schools, professional organizations, a bibliography, and an index.

Book Summaries: Online Booksellers

Commercial Internet-based booksellers, such as Amazon.com and Barnes&Noble.com, offer summaries which have been supplied by each title's publisher. Some summaries also include customer reviews. Your local bookseller may have access to in-house and commercial databases that index all published books (e.g. Books in Print®). **IMPORTANT NOTE:** Online booksellers typically produce search results for medical and non-medical books. When searching for "alternative medicine" at online booksellers' Web sites, you may discover non-medical books that use the generic term "alternative medicine" (or a synonym) in their titles. The following is indicative of the results you might find when searching for "alternative medicine" (sorted alphabetically by title; follow the hyperlink to view more details at Amazon.com):

- **Alternative Medicine and Multiple Sclerosis** by Allen C. Bowling; ISBN: 1888799528; <http://www.amazon.com/exec/obidos/ASIN/1888799528/icongroupinterna>

- **Alternative Medicine Definitive Guide to Cancer** by W. John Diamond, et al; ISBN: 1887299017;
<http://www.amazon.com/exec/obidos/ASIN/1887299017/icongroupinterna>
- **Alternative Medicine Definitive Guide to Headaches** by Robert D. Milne, et al; ISBN: 1887299181;
<http://www.amazon.com/exec/obidos/ASIN/1887299181/icongroupinterna>
- **Alternative Medicine Guide to Chronic Fatigue, Fibromyalgia and Environmental Illness** by Burton Goldberg, Editors of Alternative Medicine Digest (1998); ISBN: 1887299114;
<http://www.amazon.com/exec/obidos/ASIN/1887299114/icongroupinterna>
- **Alternative Medicine: The Definitive Guide (2nd Edition)** by Burton Goldberg, et al (2002); ISBN: 1587611406;
<http://www.amazon.com/exec/obidos/ASIN/1587611406/icongroupinterna>
- **Aromatherapy for Pregnancy and Childbirth (Home Library of Alternative Medicine)** by Margaret, Rgn Fawcett; ISBN: 1852303905;
<http://www.amazon.com/exec/obidos/ASIN/1852303905/icongroupinterna>
- **Best Alternative Medicine** by Kenneth, Dr. Pelletier, et al (2002); ISBN: 0743200276;
<http://www.amazon.com/exec/obidos/ASIN/0743200276/icongroupinterna>
- **Can Bacteria Cause Cancer?: Alternative Medicine Confronts Big Science** by David J. Hess (1997); ISBN: 0814735614;
<http://www.amazon.com/exec/obidos/ASIN/0814735614/icongroupinterna>
- **Careers in Alternative Medicine (Career Resources Library)** by Christina Potter; ISBN: 0823937542;
<http://www.amazon.com/exec/obidos/ASIN/0823937542/icongroupinterna>
- **Clinician's Complete Reference to Complementary/Alternative Medicine** by Donald W. Novey; ISBN: 0323007554;
<http://www.amazon.com/exec/obidos/ASIN/0323007554/icongroupinterna>
- **Complementary & Alternative Medicine: Legal Boundaries and Regulatory Perspectives** by Michael H. Cohen (1998); ISBN: 0801856892;
<http://www.amazon.com/exec/obidos/ASIN/0801856892/icongroupinterna>
- **Complementary and Alternative Medicine in Rehabilitation (Medical Guides to Complementary and Alternative Medicine.)** by Eric Leskowitz, et al (2003); ISBN: 0443065993;
<http://www.amazon.com/exec/obidos/ASIN/0443065993/icongroupinterna>
- **Complementary and Alternative Medicine Secrets** by Wendy Kohatsu (Editor), A Hanley & Belfus Publication; ISBN: 1560534400;
<http://www.amazon.com/exec/obidos/ASIN/1560534400/icongroupinterna>
- **Complementary and Alternative Medicine: An Evidence-Based Approach** by John W. Spencer, Joseph J. Jacobs; ISBN: 0323020283;
<http://www.amazon.com/exec/obidos/ASIN/0323020283/icongroupinterna>
- **Dr. Rosenfeld's Guide to Alternative Medicine : What Works, What Doesn't And What's Right for You** by Isadore, Md. Rosenfeld (1998); ISBN: 0449000745;
<http://www.amazon.com/exec/obidos/ASIN/0449000745/icongroupinterna>
- **Fundamentals of Complementary and Alternative Medicine** by Marc S. Micozzi (Editor); ISBN: 0443053553;
<http://www.amazon.com/exec/obidos/ASIN/0443053553/icongroupinterna>

- **Healthy Child, Whole Child: Integrating the Best of Conventional and Alternative Medicine to Keep Your Kids Healthy** by Stuart H. M.D. Ditchek (Author), Russell H. M.D. Greenfield (Author) (2002); ISBN: 0062737465;
<http://www.amazon.com/exec/obidos/ASIN/0062737465/icongroupinterna>
- **Hepatitis C Free: Alternative Medicine VS, The Drug Industry, The People Speak** by Lloyd Wright; ISBN: 0967640431;
<http://www.amazon.com/exec/obidos/ASIN/0967640431/icongroupinterna>
- **Mosby's Complementary & Alternative Medicine: A Research-Based Approach** by Lyn W. Freeman Ph.D., G. Frank Lawlis Ph.D. (2000); ISBN: 0323006973;
<http://www.amazon.com/exec/obidos/ASIN/0323006973/icongroupinterna>
- **Nature Cures: The History of Alternative Medicine in America** by James C. Whorton (2002); ISBN: 0195140710;
<http://www.amazon.com/exec/obidos/ASIN/0195140710/icongroupinterna>
- **New Choices in Natural Healing: Over 1,800 of the Best Self-Help Remedies from the World of Alternative Medicine** by The Editors of Prevention Magazine Health Books (Editor), et al (1997); ISBN: 0875963641;
<http://www.amazon.com/exec/obidos/ASIN/0875963641/icongroupinterna>
- **Professional's Handbook of Complementary & Alternative Medicines** by C. W. Fetrow, et al (2003); ISBN: 1582552436;
<http://www.amazon.com/exec/obidos/ASIN/1582552436/icongroupinterna>
- **The American Holistic Health Association Complete Guide to Alternative Medicine** by William B. Collinge, Len Duhl (Introduction) (1997); ISBN: 0446672580;
<http://www.amazon.com/exec/obidos/ASIN/0446672580/icongroupinterna>
- **The Biblical Guide to Alternative Medicine** by Neil T. Anderson, Michael Jacobson (2003); ISBN: 0830730834;
<http://www.amazon.com/exec/obidos/ASIN/0830730834/icongroupinterna>
- **The Complete Family Guide to Alternative Medicine: An Illustrated Encyclopedia of Natural Healing** by Richard Thomas (Editor), C. Norman Shealy (Editor); ISBN: 1852309016;
<http://www.amazon.com/exec/obidos/ASIN/1852309016/icongroupinterna>
- **Triumph Over Hepatitis C : An Alternative Medicine Solution Revised Edition** by Lloyd Wright, Aunika Stratton (Editor); ISBN: 0967640415;
<http://www.amazon.com/exec/obidos/ASIN/0967640415/icongroupinterna>

The National Library of Medicine Book Index

The National Library of Medicine at the National Institutes of Health has a massive database of books published on healthcare and biomedicine. Go to the following Internet site, <http://locatorplus.gov/>, and then select "Search LOCATORplus." Once you are in the search area, simply type "alternative medicine" (or synonyms) into the search box, and select "books only." From there, results can be sorted by publication date, author, or relevance. The following was recently catalogued by the National Library of Medicine:¹¹

¹¹ In addition to LOCATORPlus, in collaboration with authors and publishers, the National Center for Biotechnology Information (NCBI) is currently adapting biomedical books for the Web. The books may be accessed in two ways: (1) by searching directly using any search term or phrase (in the same way as the bibliographic database PubMed), or (2) by following the links to PubMed abstracts. Each PubMed abstract has a "Books" button

- **A consumer's guide to "alternative medicine": a close look at homeopathy, acupuncture, faith-healing, and other unconventional treatments** Author: Butler, Kurt.; Year: 1992; Buffalo, N.Y.: Prometheus Books, 1992; ISBN: 0879757337
<http://www.amazon.com/exec/obidos/ASIN/0879757337/icongroupinterna>
- **A different kind of healing: doctors speak candidly about their successes with alternative medicine** Author: Janiger, Oscar.; Year: 1993; New York: G.P. Putnam's Sons, c1993; ISBN: 0874777283
<http://www.amazon.com/exec/obidos/ASIN/0874777283/icongroupinterna>
- **A guide to alternative medicine.** Author: Law, Donald.; Year: 1974; London: Turnstone Books, c1974; ISBN: 085500035X
<http://www.amazon.com/exec/obidos/ASIN/085500035X/icongroupinterna>
- **A woman's guide to alternative medicine** Author: Grist, Liz.; Year: 1988; Chicago: Contemporary Books, c1988; ISBN: 0809245396
<http://www.amazon.com/exec/obidos/ASIN/0809245396/icongroupinterna>
- **Alternative medicine** Author: Wright, James.; Year: 1982; Sydney: Golden Press, 1982; ISBN: 0855583789
- **Alternative medicine: a bibliography of books in English** Author: West, Ruth.; Year: 1985; London; New York: Mansell Pub., 1985; ISBN: 0720117216
<http://www.amazon.com/exec/obidos/ASIN/0720117216/icongroupinterna>
- **Alternative medicine: expanding medical horizons: a report to the National Institutes of Health on alternative medical systems and practices in the United States** Author: National Institutes of Health (U.S.); Year: 1995; Washington, DC: For sale by the U.S. G.P.O., Supt. of Docs, [1995]; ISBN: 0160454794
<http://www.amazon.com/exec/obidos/ASIN/0160454794/icongroupinterna>
- **Alternative medicine: the definitive guide** Author: Burton Goldberg Group.; Year: 1993; Puyallup, Wash.: Future; ISBN: 0963633430
<http://www.amazon.com/exec/obidos/ASIN/0963633430/icongroupinterna>
- **Alternative medicine and American religious life** Author: Fuller, Robert C.; Year: 1989; New York: Oxford University Press, 1989; ISBN: 0195057759
<http://www.amazon.com/exec/obidos/ASIN/0195057759/icongroupinterna>
- **Alternative medicine in Britain** Author: Saks, Mike.; Year: 1992; Oxford: Clarendon Press; New York: Oxford University Press, 1992; ISBN: 0198272782
<http://www.amazon.com/exec/obidos/ASIN/0198272782/icongroupinterna>
- **Alternative medicine in the Netherlands: summary of the report of the Commission for Alternative Systems of Medicine.** Author: Netherlands. Commission for Alternative Systems of Medicine.; Year: 1981; The Hague: Ministry of Health and Environmental Protection, 1981
- **Alternative medicine yellow pages: the comprehensive guide to the new world of health** Author: Bonk, Melinda.; Year: 1994; Puyallup, Wash.: Future; ISBN: 0963633422
<http://www.amazon.com/exec/obidos/ASIN/0963633422/icongroupinterna>
- **Alternative medicine, a guide to natural therapies** Author: Stanway, Andrew.; Year: 1979; Adelaide [S. Aust.]: Rigby, c1979

that displays a facsimile of the abstract in which some phrases are hypertext links. These phrases are also found in the books available at NCBI. Click on hyperlinked results in the list of books in which the phrase is found. Currently, the majority of the links are between the books and PubMed. In the future, more links will be created between the books and other types of information, such as gene and protein sequences and macromolecular structures. See <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=Books>.

- **Guide to the American Medical Association Historical Health Fraud and Alternative Medicine Collection** Author: Hafner, Arthur Wayne.; Year: 1992; Chicago, IL: American Medical Association, 1992; ISBN: 0899704417
<http://www.amazon.com/exec/obidos/ASIN/0899704417/icongroupinterna>
- **Healers and alternative medicine: a sociological examination** Author: Easthope, Gary.; Year: 1986; Aldershot, Hants, England; Brookfield, Vt., U.S.A.: Gower, c1986; ISBN: 0566050986
<http://www.amazon.com/exec/obidos/ASIN/0566050986/icongroupinterna>
- **Healing powers: alternative medicine, spiritual communities, and the state** Author: Frohock, Fred M.; Year: 1992; Chicago: University of Chicago Press, c1992; ISBN: 0226265846
<http://www.amazon.com/exec/obidos/ASIN/0226265846/icongroupinterna>
- **Healing traditions: alternative medicine and the health professions** Author: O'Connor, Bonnie Blair.; Year: 1995; Philadelphia: University of Pennsylvania Press, c1995; ISBN: 0812231848
<http://www.amazon.com/exec/obidos/ASIN/0812231848/icongroupinterna>
- **Health and healing: understanding conventional and alternative medicine** Author: Weil, Andrew.; Year: 1983; Boston: Houghton Mifflin Co., 1983; ISBN: 0395344301
<http://www.amazon.com/exec/obidos/ASIN/0395344301/icongroupinterna>
- **Other healers, other cures: a guide to alternative medicine.** Author: Kruger, Helen.; Year: 1974; Indianapolis: Bobbs-Merrill, c1974; ISBN: 0672517086
<http://www.amazon.com/exec/obidos/ASIN/0672517086/icongroupinterna>
- **Personalised diagnosis: alternative medicine: the combining of diagnostic methods and principles** Author: Thompson, Walter H.; Year: 1985; [S.l.: s.n.], 1985; ISBN: 0951133306
- **Professions and the public interest: medical power, altruism, and alternative medicine** Author: Saks, Mike.; Year: 1995; London; New York: Routledge, c1995; ISBN: 0415018056
<http://www.amazon.com/exec/obidos/ASIN/0415018056/icongroupinterna>
- **Speaking of alternative medicine: acupuncture** Author: Baxi, Nilesh.; Year: 1985; New Delhi: Sterling, c1985
- **Studies in the history of alternative medicine** Author: Cooter, Roger.; Year: 1988; New York: St. Martin's Press, 1988; ISBN: 0312016832
<http://www.amazon.com/exec/obidos/ASIN/0312016832/icongroupinterna>
- **The Encyclopedia of alternative medicine and self-help** Author: Hulke, Malcolm.; Year: 1979; New York: Schocken, 1979; ISBN: 0805237135
<http://www.amazon.com/exec/obidos/ASIN/0805237135/icongroupinterna>
- **The Encyclopedia of alternative medicine and self-help** Author: Hulke, Malcolm.; Year: 1978; London: Rider, 1978; ISBN: 0091328705
<http://www.amazon.com/exec/obidos/ASIN/0091328705/icongroupinterna>
- **The healing power: a handbook of alternative medicine and natural health** Author: Drury, Nevill.; Year: 1981; London: Frederick Muller, 1981; ISBN: 0584971060
<http://www.amazon.com/exec/obidos/ASIN/0584971060/icongroupinterna>
- **Will to be well: the real alternative medicine** Author: Hodgkinson, Neville.; Year: 1984; London: Hutchinson, 1984; ISBN: 0091587816
<http://www.amazon.com/exec/obidos/ASIN/0091587816/icongroupinterna>

Chapters on Alternative Medicine

In order to find chapters that specifically relate to alternative medicine, an excellent source of abstracts is the Combined Health Information Database. You will need to limit your search to book chapters and alternative medicine using the "Detailed Search" option. Go to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. To find book chapters, use the drop boxes at the bottom of the search page where "You may refine your search by." Select the dates and language you prefer, and the format option "Book Chapter." Type "alternative medicine" (or synonyms) into the "For these words:" box. The following is a typical result when searching for book chapters on alternative medicine:

- **Alternative Medicine**

Source: in Stein, S.H. and Rood, R.P. *Inflammatory Bowel Disease: A Guide for Patients and Their Families*. 2nd ed. Philadelphia, PA: Lippincott-Raven Publishers. 1999. p. 175-193.

Contact: Available from Crohn's and Colitis Foundation of America. 386 Park Avenue South, 17th Floor, New York, NY 10016-8804. (800) 932-2423. Fax (212) 779-4098. E-mail: orders@ccfa.org. Website: www.ccfa.org. PRICE: \$17.00 for members; \$22.00 for nonmembers; plus shipping and handling. ISBN: 0397517718.

Summary: While there is continued progress in treating inflammatory bowel disease (IBD), more people are turning to alternative modalities to try to relieve their symptoms. This chapter on alternative medicine in IBD is from a text written specifically for people with inflammatory bowel disease (IBD), which is the collective term for ulcerative colitis and Crohn's disease. Ulcerative colitis is an inflammatory disease of the large intestine (the colon), that is characterized by inflammation and ulceration of its inner lining. By contrast, Crohn's disease can affect any area of the gastrointestinal tract, including the small intestine. The author stresses that the biggest single problem with alternative medicine is the lack of responsible, scientifically based information on the safety, potential effects, and long term effects of alternative modalities. The author uses the term integrative medicine to refer to the integration of allopathic medicine and alternative therapies. The author stresses the benefits of allopathic medicine and cautions against using any physician or practitioner who suggests that Western medical care not be used or who will not work with or coordinate activities with a primary care physician or gastroenterologist. Topics covered include insurance coverage for alternative medicine for IBD, medical training, herbal remedies, manipulation therapy, massage therapy, acupuncture and traditional Chinese medicine, music and music beds, homeopathy, aromatherapy, psychoneuroimmunology, and prayer. The author concludes by reiterating the importance of combining traditional and alternative approaches to the treatment of IBD.

Directories

In addition to the references and resources discussed earlier in this chapter, a number of directories relating to alternative medicine have been published that consolidate information across various sources. The Combined Health Information Database lists the following, which you may wish to consult in your local medical library:¹²

¹² You will need to limit your search to "Directory" and "diseaseX" using the "Detailed Search" option. Go directly to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. To find directories, use the drop boxes at the

- **Directory of Schools for Alternative and Complementary Health Care**

Source: Phoenix, AZ: Oryx Press. 1998. 250 p.

Contact: Oryx Press. PO Box 33889, Phoenix, AZ 85067-3889. 800-279-6799, 602-265-2651, FAX: 602-265-2650, 800-279-4663. PRICE: \$49.50. ISBN: 157356110X.

Summary: This book provides information on schools and programs in the United States and Canada that offer professional training in alternative and complementary modalities, including acupressure, acupuncture, Alexander technique, aromatherapy, Ayurvedic medicine, biofeedback, chiropractic, Feldenkrais, herbal medicine, homeopathy, hypnotherapy, massage therapy and bodywork, midwifery, naturopathic medicine, Oriental medicine, polarity therapy, reflexology, reiki, Shiatsu, and yoga. The book contains a list of abbreviations, a glossary, a subject index, and nine essays on selected **alternative medicine** health fields describing each modality and the training and education required to practice in that field. The alphabetical listing of schools by state provides contact information, including the school's name, address, telephone number, fax number, e-mail address, and Web page address, if available. The school listing is followed by a list of organizations and accrediting bodies and resources for further reading. This book also provides an index of schools by name and by specialization, and a general index.

bottom of the search page where "You may refine your search by." For publication date, select "All Years." Select your preferred language and the format option "Directory." Type "diseases" (or synonyms) into the "For these words:" box. You should check back periodically with this database as it is updated every three months.

CHAPTER 8. MULTIMEDIA ON ALTERNATIVE MEDICINE

Overview

In this chapter, we show you how to keep current on multimedia sources of information on alternative medicine. We start with sources that have been summarized by federal agencies, and then show you how to find bibliographic information catalogued by the National Library of Medicine.

Audio Recordings

The Combined Health Information Database contains abstracts on audio productions. To search CHID, go directly to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. To find audio productions, use the drop boxes at the bottom of the search page where "You may refine your search by." Select the dates and language you prefer, and the format option "Sound Recordings." Type "alternative medicine" (or synonyms) into the "For these words:" box. The following is a typical result when searching for sound recordings on alternative medicine:

- **Traditional Chinese Medicine: Early HIV Clinic Programs; the 16th National Lesbian & Gay Health Conference & 12th Annual AIDS/HIV Forum, New York, NY, June 21 - 26, 1994**

Contact: Encore Cassettes, PO Box 231340, San Diego, CA, 92194, (619) 596-8402.

Summary: This audio cassette recording begins with a discussion of acupuncture and AIDS. Tom Sinclair, executive director of the Immune Enhancement Project, and Howard Moffat, a licensed acupuncturist, then describe **alternative medicine** programs as models of treatment. The definitions and scope of alternative, complementary, and holistic medicines are compared. The speakers emphasize using alternative treatments, focusing on what works individually. The significant decrease of symptoms is highlighted as the goal, concentrating on quality of life.

Bibliography: Multimedia on Alternative Medicine

The National Library of Medicine is a rich source of information on healthcare-related multimedia productions including slides, computer software, and databases. To access the

multimedia database, go to the following Web site: <http://locatorplus.gov/>. Select "Search LOCATORplus." Once in the search area, simply type in alternative medicine (or synonyms). Then, in the option box provided below the search box, select "Audiovisuals and Computer Files." From there, you can choose to sort results by publication date, author, or relevance. The following multimedia has been indexed on alternative medicine (for more information, follow the hyperlink indicated):

- **Alternative health [videorecording]: acupuncture** Source: a co-production of Multimedia Communications and Physical Education and Development; Year: 1998; Format: Videorecording; Oakland, CA: Kaiser Foundation Health Plan, c1998
- **Alternative medicine [videorecording]** Source: a presentation of Films for the Humanities & Sciences; Year: 1996; Format: Videorecording; Princeton, N.J.: Films for the Humanities & Sciences, c1996
- **Alternative medicine [videorecording]** Source: produced and distributed by the Canadian Broadcasting Corporation; Year: 1995; Format: Videorecording; Eugene, OR: New Dimension Media, 1995
- **Alternative medicine [videorecording]: is it the prescription for you?** Source: a presentation of Films for the Humanities & Sciences; Year: 1996; Format: Videorecording; [Orlando, Fla.]: Ivanhoe Broadcast News, c1996
- **Alternative medicine [videorecording]: the healing arts** Source: a presentation of Films for the Humanities & Sciences; Year: 1996; Format: Videorecording; Princeton, N.J.: Films for the Humanities & Sciences, c1996
- **Alternative medicine [videorecording]: when your patient asks** Source: James S. Gordon, Wayne B. Jones; Year: 1995; Format: Videorecording; Secaucus, N.J.: Network for Continuing Medical Education, 1995
- **Alternative medicine [videorecording]: Yoga** Source: Baba Yoga Bay; Year: 2003; Format: Videorecording; Atlanta, GA: History on Video, c2003
- **AMED [electronic resource]: allied and alternative medicine.** Year: 9999; Format: Electronic resource; [Norwood, Mass.]: SilverPlatter International,
- **BMC complementary and alternative medicine [electronic resource].** Year: 9999; Format: Electronic resource; London: BioMed Central, [2001-
- **Complementary and alternative medicine [videorecording]** Source: [HSTN]; Year: 2003; Format: Videorecording; Carrollton, TX: PRIMEDIA Workplace Learning, c2003
- **Complementary and alternative medicine management: forms and guidelines** Source: Michelle Bowman, G. Frank Lawlis; Year: 2001; Gaithersburg, Md.: Aspen Publishers, 2001
- **Exploring the scientific basis of complementary and alternative medicine [videorecording]** Source: Office of Research Services, Medical Arts and Photography Branch; Year: 2002; Format: Videorecording; [Bethesda, Md.: National Institutes of Health, 2002]
- **Fundamentals of complementary and alternative medicine** Source: edited by Marc S. Micozzi; with foreword by C. Everett Koop; Year: 1996; New York: Churchill Livingstone, 1996
- **Let truth be the bias [videorecording]: the presence of alternative medicine in America.** Year: 1993; Format: Videorecording; [United States]: American Preventive Medical Assn., c1993
- **The rise and rise of alternative medicine [videorecording]** Source: a presentation of Films for the Humanities & Sciences; produced by Cine-Medic Productions, Inc.... [et

al.]; Year: 2001; Format: Videorecording; Princeton, N.J.: Films for the Humanities & Sciences, c2001

- **White House Commission on Complementary and Alternative Medicine Policy [electronic resource]: final report.** Source: White House Commission on Complementary and Alternative Medicine Policy (U.S.); Year: 2002; Format: Electronic resource; [Washington, D.C.]: The Commission, [2002]

CHAPTER 9. PERIODICALS AND NEWS ON ALTERNATIVE MEDICINE

Overview

In this chapter, we suggest a number of news sources and present various periodicals that cover alternative medicine.

News Services and Press Releases

One of the simplest ways of tracking press releases on alternative medicine is to search the news wires. In the following sample of sources, we will briefly describe how to access each service. These services only post recent news intended for public viewing.

PR Newswire

To access the PR Newswire archive, simply go to <http://www.prnewswire.com/>. Select your country. Type "alternative medicine" (or synonyms) into the search box. You will automatically receive information on relevant news releases posted within the last 30 days. The search results are shown by order of relevance.

Reuters Health

The Reuters' Medical News and Health eLine databases can be very useful in exploring news archives relating to alternative medicine. While some of the listed articles are free to view, others are available for purchase for a nominal fee. To access this archive, go to <http://www.reutershealth.com/en/index.html> and search by "alternative medicine" (or synonyms). The following was recently listed in this archive for alternative medicine:

- **Most HIV-infected patients use complementary and alternative medicine**
Source: Reuters Medical News
Date: May 27, 2003
<http://www.reutershealth.com/archive/2003/05/27/professional/links/20030527clin018.html>

- **Chinese, alternative medicine studied for SARS**
Source: Reuters Health eLine
Date: May 21, 2003
- **Homeopathy same as placebo for kids with asthma**
Source: Reuters Health eLine
Date: April 02, 2003
- **Alternative medicine use by cancer patients associated with shorter survival**
Source: Reuters Medical News
Date: March 19, 2003
- **Analysis shows more study needed for homeopathy**
Source: Reuters Health eLine
Date: March 03, 2003
- **Teens with asthma turn to alternative medicines**
Source: Reuters Health eLine
Date: October 17, 2002
- **Majority of HIV-infected patients use alternative medicines**
Source: Reuters Industry Breifing
Date: August 23, 2002
- **Alternative medicine use is common among patients with headache syndromes**
Source: Reuters Medical News
Date: August 21, 2002
- **Many headache patients use alternative medicine**
Source: Reuters Health eLine
Date: August 06, 2002
- **Italy's medical board recognizes alternative medicine as legitimate**
Source: Reuters Industry Breifing
Date: May 23, 2002
- **Italy's medical board recognises alternative medicine**
Source: Reuters Medical News
Date: May 23, 2002
- **Italy docs seek to legitimize alternative medicine**
Source: Reuters Health eLine
Date: May 23, 2002

- **WHO urges member states to regulate alternative medicines**
Source: Reuters Industry Breifing
Date: May 16, 2002
- **Alternative medicines may pose risk, WHO warns**
Source: Reuters Health eLine
Date: May 16, 2002
- **Alternative medicines may pose risk, UN warns**
Source: Reuters Medical News
Date: May 16, 2002
- **US alternative medicine report spurs controversy**
Source: Reuters Health eLine
Date: March 25, 2002
- **HHS quietly releases White House Commission report on alternative medicine**
Source: Reuters Medical News
Date: March 25, 2002
- **Homeopathy same as a placebo for asthma: study**
Source: Reuters Health eLine
Date: March 01, 2002
- **US needs more research, info on alternative medicine**
Source: Reuters Medical News
Date: February 22, 2002
- **More study of, info on alternative medicine needed**
Source: Reuters Health eLine
Date: February 22, 2002
- **Alternative medicine usage fostered by insurance coverage**
Source: Reuters Industry Breifing
Date: February 12, 2002
- **Many kids with cancer use alternative medicine**
Source: Reuters Health eLine
Date: November 22, 2001
- **Alternative medicine doesn't hold cure for bioterror agents, lawmakers hear**
Source: Reuters Industry Breifing
Date: November 14, 2001

- **Alternative medicine use on the rise in US**
Source: Reuters Industry Breifing
Date: August 21, 2001
- **Alternative medicine goes mainstream in US**
Source: Reuters Health eLine
Date: August 21, 2001
- **NIH looks to industry input on assessing alternative medicine safety**
Source: Reuters Industry Breifing
Date: May 14, 2001
- **Acupuncture may ease knee arthritis pain: report**
Source: Reuters Health eLine
Date: May 08, 2001
- **Chiropractors team up with alternative medicine network**
Source: Reuters Medical News
Date: April 24, 2001
- **Alternative medicine use widespread among HIV-infected individuals**
Source: Reuters Industry Breifing
Date: April 20, 2001
- **Alternative medicine used worldwide for cancer**
Source: Reuters Health eLine
Date: March 29, 2001
- **Alternative medicine first choice for depression**
Source: Reuters Health eLine
Date: March 16, 2001
- **Docs urged to keep up with alternative medicine**
Source: Reuters Health eLine
Date: March 07, 2001
- **NIH launches alternative medicine database**
Source: Reuters Health eLine
Date: February 06, 2001
- **NCCAM director foresees slowdown in alternative medicine grants**
Source: Reuters Industry Breifing
Date: February 06, 2001

- **Alternative medicine literature now available on NIH's PubMed database**
Source: Reuters Medical News
Date: February 05, 2001
- **Cornell center opens doors to alternative medicine**
Source: Reuters Medical News
Date: February 02, 2001
- **Studies lacking on alternative medicine and asthma**
Source: Reuters Health eLine
Date: January 15, 2001
- **Many older Americans try alternative medicine**
Source: Reuters Health eLine
Date: December 05, 2000
- **British Lords want scrutiny of alternative medicine**
Source: Reuters Health eLine
Date: November 28, 2000
- **VHA hires Kaiser Institute to help develop alternative medicine programs**
Source: Reuters Industry Briefing
Date: October 17, 2000
- **Alternative medicines may complicate heart surgery**
Source: Reuters Health eLine
Date: September 20, 2000
- **Acupuncture could take a bite out of dental pain**
Source: Reuters Health eLine
Date: September 05, 2000
- **Appointments made to White House commission on alternative medicine**
Source: Reuters Medical News
Date: July 17, 2000
- **Clinton announces Alternative Medicine Commission members**
Source: Reuters Health eLine
Date: July 14, 2000
- **Neuroimaging helps map acupuncture mechanisms**
Source: Reuters Medical News
Date: June 30, 2000

- **Many cancer patients use alternative medicine without physician's knowledge**
Source: Reuters Industry Briefing
Date: June 30, 2000
- **Many cancer patients use alternative medicine**
Source: Reuters Health eLine
Date: June 29, 2000
- **Director of NIH's alternative medicine center lays out ambitious agenda**
Source: Reuters Medical News
Date: June 14, 2000
- **Acupuncture reduces myocardial ischemia in animal model of CAD**
Source: Reuters Medical News
Date: June 14, 2000
- **White House commission on alternative medicine to start meeting**
Source: Reuters Medical News
Date: June 12, 2000

The NIH

Within MEDLINEplus, the NIH has made an agreement with the New York Times Syndicate, the AP News Service, and Reuters to deliver news that can be browsed by the public. Search news releases at http://www.nlm.nih.gov/medlineplus/alphaneews_a.html. MEDLINEplus allows you to browse across an alphabetical index. Or you can search by date at the following Web page: <http://www.nlm.nih.gov/medlineplus/newsbydate.html>. Often, news items are indexed by MEDLINEplus within its search engine.

Business Wire

Business Wire is similar to PR Newswire. To access this archive, simply go to <http://www.businesswire.com/>. You can scan the news by industry category or company name.

Market Wire

Market Wire is more focused on technology than the other wires. To browse the latest press releases by topic, such as alternative medicine, biotechnology, fitness, healthcare, legal, nutrition, and pharmaceuticals, access Market Wire's Medical/Health channel at http://www.marketwire.com/mw/release_index?channel=MedicalHealth. Or simply go to Market Wire's home page at <http://www.marketwire.com/mw/home>, type "alternative medicine" (or synonyms) into the search box, and click on "Search News." As this service is technology oriented, you may wish to use it when searching for press releases covering diagnostic procedures or tests.

Search Engines

Medical news is also available in the news sections of commercial Internet search engines. See the health news page at Yahoo (http://dir.yahoo.com/Health/News_and_Media/), or you can use this Web site's general news search page at <http://news.yahoo.com/>. Type in "alternative medicine" (or synonyms). If you know the name of a company that is relevant to alternative medicine, you can go to any stock trading Web site (such as <http://www.etrade.com/>) and search for the company name there. News items across various news sources are reported on indicated hyperlinks. Google offers a similar service at <http://news.google.com/>.

BBC

Covering news from a more European perspective, the British Broadcasting Corporation (BBC) allows the public free access to their news archive located at <http://www.bbc.co.uk/>. Search by "alternative medicine" (or synonyms).

Newsletters on Alternative Medicine

Find newsletters on alternative medicine using the Combined Health Information Database (CHID). You will need to use the "Detailed Search" option. To access CHID, go to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. Limit your search to "Newsletter" and "alternative medicine." Go to the bottom of the search page where "You may refine your search by." Select the dates and language that you prefer. For the format option, select "Newsletter." Type "alternative medicine" (or synonyms) into the "For these words:" box. The following list was generated using the options described above:

- **Complementary and Alternative Medicine at the NIH**

Source: Complementary and Alternative Medicine at the NIH. 10(1): 1-4. Spring 2003.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D182.

Summary: This quarterly newsletter provides a variety of articles related to current research on complementary and alternative medicine (CAM). It includes announcements of future CAM meetings and conferences, descriptions of recent meetings and conferences, listings and write-ups of new studies at the National Center for Complementary and Alternative Medicine (NCCAM) Research Centers, announcements of new NCCAM appointments, short fact sheets on CAM topics, a calendar of events, and a wide range of other CAM news-related items.

Newsletter Articles

Use the Combined Health Information Database, and limit your search criteria to "newsletter articles." Again, you will need to use the "Detailed Search" option. Go directly to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. Go to the bottom of the search page where "You may refine your search by." Select the dates and language that you

prefer. For the format option, select "Newsletter Article." Type "alternative medicine" (or synonyms) into the "For these words:" box. You should check back periodically with this database as it is updated every three months. The following is a typical result when searching for newsletter articles on alternative medicine:

- **Pushing the Boundaries: Alternative Therapies for Children**

Source: Kids Get Arthritis Too. pp. 1-3. May-June 1999.

Contact: Available from Kids Get Arthritis Too (Arthritis Foundation). P.O. Box 921907, Norcross, GA 30010-1907. (800) 268-6942.

Summary: This newsletter article provides the parents of children who have arthritis with information on alternative therapies. Although many physicians were once skeptical about alternative practices, with the establishment of the National Institutes of Health Office of **alternative medicine**, now known as the National Center for Complementary and **alternative medicine**, in 1992, alternative therapies are being acknowledged more openly by conventional health professionals. The article examines some of the most commonly asked about, recommended, or studied therapies for children who have arthritis, including massage therapy, biofeedback, acupuncture, and dietary supplements and modifications. Massage therapy is considered by many to be an excellent method of easing the pain and stiffness associated with arthritis. Massage therapists use a combination of strokes, friction, and pressure to help relax the muscles. Studies have demonstrated the effectiveness of massage therapy for temporary symptom relief. Biofeedback or relaxation training involves the use of electromyogram biofeedback equipment to help patients learn to monitor and reduce muscle tension. Biofeedback gives children who have arthritis a productive role in managing their own symptoms. In acupuncture, disposable stainless steel needles are used to stimulate specific points throughout the body. Studies have suggested that acupuncture may lessen pain by making the body release endorphins. There is limited evidence that certain dietary supplements, including fish and plant oils, glucosamine, and chondroitin, provide symptom relief in people who have arthritis.

- **New Developments in IBS Research**

Source: Participate. 8(4): 1-4. Winter 1999.

Contact: Available from International Foundation for Functional Gastrointestinal Disorders (IFFGD). P.O. Box 170864, Milwaukee, WI 53217. (888) 964-2001 or (414) 964-1799. Fax (414) 964-7176. E-mail: iffgd@iffgd.org. Website: www.iffgd.org.

Summary: This newsletter article updates readers with irritable bowel syndrome (IBS) on new developments in IBS research. The authors note that not only is the research offering new insight but the increase in the number of studies being performed reflects the rising awareness and interest in IBS by clinicians, researchers, the pharmaceutical industry, and the federal government. IBS symptoms present themselves in many ways and to date, no singular cause has been found. Researchers are looking at a variety of possible causes and links, such as altered digestion from food intolerance or food allergy, altered sleep, altered gut sensation, and abnormal gastrointestinal movements. In addition to altered gut and sleep perception, other investigators have suggested that IBS patients may have altered perception of all involuntary body functions. Numerous drug trials have been performed over the past year, including those using alosetron (which slows the movement of food through the intestines and may be useful for people with IBS diarrhea) and HTF919 (which facilitates the movement of food through the small intestine and colon and may be useful for people with IBS constipation). The

authors briefly note that many patients with IBS are turning to herbal, homeopathic, or other **alternative medicine** options. The authors conclude that the fact that researchers are discovering so many exacerbating factors and that so many body areas are involved is a testament to the complex, multisystemic nature of this disorder.

Academic Periodicals covering Alternative Medicine

Numerous periodicals are currently indexed within the National Library of Medicine's PubMed database that are known to publish articles relating to alternative medicine. In addition to these sources, you can search for articles covering alternative medicine that have been published by any of the periodicals listed in previous chapters. To find the latest studies published, go to <http://www.ncbi.nlm.nih.gov/pubmed>, type the name of the periodical into the search box, and click "Go."

If you want complete details about the historical contents of a journal, you can also visit the following Web site: <http://www.ncbi.nlm.nih.gov/entrez/jrbrowser.cgi>. Here, type in the name of the journal or its abbreviation, and you will receive an index of published articles. At <http://locatorplus.gov/>, you can retrieve more indexing information on medical periodicals (e.g. the name of the publisher). Select the button "Search LOCATORplus." Then type in the name of the journal and select the advanced search option "Journal Title Search."

APPENDICES

APPENDIX A. PHYSICIAN RESOURCES

Overview

In this chapter, we focus on databases and Internet-based guidelines and information resources created or written for a professional audience.

NIH Guidelines

Commonly referred to as “clinical” or “professional” guidelines, the National Institutes of Health publish physician guidelines for the most common diseases. Publications are available at the following by relevant Institute¹³:

- Office of the Director (OD); guidelines consolidated across agencies available at <http://www.nih.gov/health/consumer/conkey.htm>
- National Institute of General Medical Sciences (NIGMS); fact sheets available at <http://www.nigms.nih.gov/news/facts/>
- National Library of Medicine (NLM); extensive encyclopedia (A.D.A.M., Inc.) with guidelines: <http://www.nlm.nih.gov/medlineplus/healthtopics.html>
- National Cancer Institute (NCI); guidelines available at <http://www.cancer.gov/cancerinfo/list.aspx?viewid=5f35036e-5497-4d86-8c2c-714a9f7c8d25>
- National Eye Institute (NEI); guidelines available at <http://www.nei.nih.gov/order/index.htm>
- National Heart, Lung, and Blood Institute (NHLBI); guidelines available at <http://www.nhlbi.nih.gov/guidelines/index.htm>
- National Human Genome Research Institute (NHGRI); research available at <http://www.genome.gov/page.cfm?pageID=10000375>
- National Institute on Aging (NIA); guidelines available at <http://www.nia.nih.gov/health/>

¹³ These publications are typically written by one or more of the various NIH Institutes.

- National Institute on Alcohol Abuse and Alcoholism (NIAAA); guidelines available at <http://www.niaaa.nih.gov/publications/publications.htm>
- National Institute of Allergy and Infectious Diseases (NIAID); guidelines available at <http://www.niaid.nih.gov/publications/>
- National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS); fact sheets and guidelines available at <http://www.niams.nih.gov/hi/index.htm>
- National Institute of Child Health and Human Development (NICHD); guidelines available at <http://www.nichd.nih.gov/publications/pubskey.cfm>
- National Institute on Deafness and Other Communication Disorders (NIDCD); fact sheets and guidelines at <http://www.nidcd.nih.gov/health/>
- National Institute of Dental and Craniofacial Research (NIDCR); guidelines available at <http://www.nidr.nih.gov/health/>
- National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK); guidelines available at <http://www.niddk.nih.gov/health/health.htm>
- National Institute on Drug Abuse (NIDA); guidelines available at <http://www.nida.nih.gov/DrugAbuse.html>
- National Institute of Environmental Health Sciences (NIEHS); environmental health information available at <http://www.niehs.nih.gov/external/facts.htm>
- National Institute of Mental Health (NIMH); guidelines available at <http://www.nimh.nih.gov/practitioners/index.cfm>
- National Institute of Neurological Disorders and Stroke (NINDS); neurological disorder information pages available at http://www.ninds.nih.gov/health_and_medical/disorder_index.htm
- National Institute of Nursing Research (NINR); publications on selected illnesses at <http://www.nih.gov/ninr/news-info/publications.html>
- National Institute of Biomedical Imaging and Bioengineering; general information at http://grants.nih.gov/grants/becon/becon_info.htm
- Center for Information Technology (CIT); referrals to other agencies based on keyword searches available at http://kb.nih.gov/www_query_main.asp
- National Center for Complementary and Alternative Medicine (NCCAM); health information available at <http://nccam.nih.gov/health/>
- National Center for Research Resources (NCRR); various information directories available at <http://www.ncrr.nih.gov/publications.asp>
- Office of Rare Diseases; various fact sheets available at http://rarediseases.info.nih.gov/html/resources/rep_pubs.html
- Centers for Disease Control and Prevention; various fact sheets on infectious diseases available at <http://www.cdc.gov/publications.htm>

NIH Databases

In addition to the various Institutes of Health that publish professional guidelines, the NIH has designed a number of databases for professionals.¹⁴ Physician-oriented resources provide a wide variety of information related to the biomedical and health sciences, both past and present. The format of these resources varies. Searchable databases, bibliographic citations, full-text articles (when available), archival collections, and images are all available. The following are referenced by the National Library of Medicine:¹⁵

- **Bioethics:** Access to published literature on the ethical, legal, and public policy issues surrounding healthcare and biomedical research. This information is provided in conjunction with the Kennedy Institute of Ethics located at Georgetown University, Washington, D.C.: http://www.nlm.nih.gov/databases/databases_bioethics.html
- **HIV/AIDS Resources:** Describes various links and databases dedicated to HIV/AIDS research: <http://www.nlm.nih.gov/pubs/factsheets/aidsinfs.html>
- **NLM Online Exhibitions:** Describes “Exhibitions in the History of Medicine”: <http://www.nlm.nih.gov/exhibition/exhibition.html>. Additional resources for historical scholarship in medicine: <http://www.nlm.nih.gov/hmd/hmd.html>
- **Biotechnology Information:** Access to public databases. The National Center for Biotechnology Information conducts research in computational biology, develops software tools for analyzing genome data, and disseminates biomedical information for the better understanding of molecular processes affecting human health and disease: <http://www.ncbi.nlm.nih.gov/>
- **Population Information:** The National Library of Medicine provides access to worldwide coverage of population, family planning, and related health issues, including family planning technology and programs, fertility, and population law and policy: http://www.nlm.nih.gov/databases/databases_population.html
- **Cancer Information:** Access to cancer-oriented databases: http://www.nlm.nih.gov/databases/databases_cancer.html
- **Profiles in Science:** Offering the archival collections of prominent twentieth-century biomedical scientists to the public through modern digital technology: <http://www.profiles.nlm.nih.gov/>
- **Chemical Information:** Provides links to various chemical databases and references: <http://sis.nlm.nih.gov/Chem/ChemMain.html>
- **Clinical Alerts:** Reports the release of findings from the NIH-funded clinical trials where such release could significantly affect morbidity and mortality: http://www.nlm.nih.gov/databases/alerts/clinical_alerts.html
- **Space Life Sciences:** Provides links and information to space-based research (including NASA): http://www.nlm.nih.gov/databases/databases_space.html
- **MEDLINE:** Bibliographic database covering the fields of medicine, nursing, dentistry, veterinary medicine, the healthcare system, and the pre-clinical sciences: http://www.nlm.nih.gov/databases/databases_medline.html

¹⁴ Remember, for the general public, the National Library of Medicine recommends the databases referenced in MEDLINEplus (<http://medlineplus.gov/> or <http://www.nlm.nih.gov/medlineplus/databases.html>).

¹⁵ See <http://www.nlm.nih.gov/databases/databases.html>.

- **Toxicology and Environmental Health Information (TOXNET):** Databases covering toxicology and environmental health: <http://sis.nlm.nih.gov/Tox/ToxMain.html>
- **Visible Human Interface:** Anatomically detailed, three-dimensional representations of normal male and female human bodies:
http://www.nlm.nih.gov/research/visible/visible_human.html

The Combined Health Information Database

A comprehensive source of information on clinical guidelines written for professionals is the Combined Health Information Database. You will need to limit your search to one of the following: Brochure/Pamphlet, Fact Sheet, or Information Package, and “alternative medicine” using the “Detailed Search” option. Go directly to the following hyperlink: <http://chid.nih.gov/detail/detail.html>. To find associations, use the drop boxes at the bottom of the search page where “You may refine your search by.” For the publication date, select “All Years.” Select your preferred language and the format option “Fact Sheet.” Type “alternative medicine” (or synonyms) into the “For these words:” box. The following is a sample result:

- **Report of the NIH AIDS Research Program Evaluation Working Group of the Office of AIDS Research Advisory Council**

Contact: US Department of Health and Human Services, Public Health Service, National Institutes of Health, Office of AIDS Research, 31 Center Dr Bldg 2 Rm 4E13, Bethesda, MD, 20892, (301) 496-0357, <http://www.nih.gov/od/oar/index.htm>.

Summary: A group of scientific experts from outside the government was assembled and asked to evaluate each component of the current National Institutes of Health (NIH) AIDS research program. This report provides a plan for restructuring the NIH AIDS research program to streamline research, strengthen high-quality programs, and eliminate inadequate programs. The recommendations set forth in this report address AIDS vaccine research, research on the human immune system, HIV prevention science research, clinical trials, research on opportunistic infections, drug discovery research, complementary and **alternative medicine**, regional primate research centers, AIDS research centers, repositories and databases, and the AIDS research information system.

- **Ephedra and Ephedrine for Weight Loss and Athletic Performance Enhancement: Clinical Efficacy and Side Effects**

Source: Rockville, MD: Food and Drug Administration. 2003. 6 p.

Contact: Available from Agency for Healthcare Research and Quality. U.S. Department of Health and Human Services, 2101 East Jefferson Street, Rockville, MD 20852. (301) 594-1364. PRICE: Free. AHRQ Publication No. 03-E022.

Summary: This Evidence Report/Technology Assessment, funded by the National Institutes of Health Office of Dietary Supplements, the National Center for Complementary and **alternative medicine**, and the Agency for Healthcare Research and Quality, addresses research questions regarding the efficacy of herbal ephedra and ephedrine for weight loss and athletic performance through a comprehensive literature review and synthesis of evidence. The report assesses the safety of these products through a review of clinical trials, as well as meta-analyses where appropriate. In addition, the ephedra- and ephedrine-related adverse events reports on file with the Food and Drug Administration, published case reports, and reports to a manufacturer

of ephedra-containing products are reviewed. The report is divided into four major sections: reporting the evidence, methodology, findings, and future research.

- **WHO Traditional Medicine Strategy: 2002-2005**

Source: Geneva, Switzerland: World Health Organization. 2002. 61 p.

Contact: Available from World Health Organization Headquarters. Avenue Appia 20, 1211 Geneva 27, Switzerland. Telephone: (+00 41 22) 791 21 11; Fax: (+00 41 22) 791 3111; E-mail: publications@who.int. PRICE: Free.

Summary: This World Health Organization (WHO) publication defines the role of WHO in traditional/complementary and **alternative medicine** (CAM) and delineates its strategy to address issues of policy, safety, efficacy, quality, access, and rational use of traditional/CAM. There are five sections. Section 1 is a global review of traditional/CAM. Section 2 focuses on challenges. Section 3 reviews the current role of WHO. Section 4 provides information on international and national resources for traditional medicine. Section 5 defines the strategy and plan of action for 2002 through 2005. The publication also includes a section defining acronyms, abbreviations, and WHO regions. 2 annexes. Numerous references.

- **Expanding Horizons of Healthcare: Five-Year Strategic Plan, 2001-2005**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2000. 44 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D057.

Summary: This report describes the National Center for Complementary and Alternative Medicine's (NCCAM) first five-year strategic plan, which covers the years 2001 through 2005. The report consists of four major sections: the case for action, future directions, the NCCAM strategic plan, and appendices. Most of the report is dedicated to the third section, the strategic plan for NCCAM. At the beginning of this section, the mission and vision for NCCAM are laid out. The strategic areas of the plan—investing in research, training CAM investigators, expanding outreach, and facilitating integration—are then discussed in detail. There are nine appendices to the report.

The NLM Gateway¹⁶

The NLM (National Library of Medicine) Gateway is a Web-based system that lets users search simultaneously in multiple retrieval systems at the U.S. National Library of Medicine (NLM). It allows users of NLM services to initiate searches from one Web interface, providing one-stop searching for many of NLM's information resources or databases.¹⁷ To use the NLM Gateway, simply go to the search site at <http://gateway.nlm.nih.gov/gw/Cmd>. Type "alternative medicine" (or synonyms) into the search box and click "Search." The results will be presented in a tabular form, indicating the number of references in each database category.

¹⁶ Adapted from NLM: <http://gateway.nlm.nih.gov/gw/Cmd?Overview.x>.

¹⁷ The NLM Gateway is currently being developed by the Lister Hill National Center for Biomedical Communications (LHNCBC) at the National Library of Medicine (NLM) of the National Institutes of Health (NIH).

Results Summary

Category	Items Found
Journal Articles	87244
Books / Periodicals / Audio Visual	2011
Consumer Health	237
Meeting Abstracts	183
Other Collections	31
Total	89706

HSTAT¹⁸

HSTAT is a free, Web-based resource that provides access to full-text documents used in healthcare decision-making.¹⁹ These documents include clinical practice guidelines, quick-reference guides for clinicians, consumer health brochures, evidence reports and technology assessments from the Agency for Healthcare Research and Quality (AHRQ), as well as AHRQ's Put Prevention Into Practice.²⁰ Simply search by "alternative medicine" (or synonyms) at the following Web site: <http://text.nlm.nih.gov>.

Coffee Break: Tutorials for Biologists²¹

Coffee Break is a general healthcare site that takes a scientific view of the news and covers recent breakthroughs in biology that may one day assist physicians in developing treatments. Here you will find a collection of short reports on recent biological discoveries. Each report incorporates interactive tutorials that demonstrate how bioinformatics tools are used as a part of the research process. Currently, all Coffee Breaks are written by NCBI staff.²² Each report is about 400 words and is usually based on a discovery reported in one or more articles from recently published, peer-reviewed literature.²³ This site has new articles every few weeks, so it can be considered an online magazine of sorts. It is intended for general background information. You can access the Coffee Break Web site at the following hyperlink: <http://www.ncbi.nlm.nih.gov/Coffeebreak/>.

¹⁸ Adapted from HSTAT: <http://www.nlm.nih.gov/pubs/factsheets/hstat.html>.

¹⁹ The HSTAT URL is <http://hstat.nlm.nih.gov/>.

²⁰ Other important documents in HSTAT include: the National Institutes of Health (NIH) Consensus Conference Reports and Technology Assessment Reports; the HIV/AIDS Treatment Information Service (ATIS) resource documents; the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment (SAMHSA/CSAT) Treatment Improvement Protocols (TIP) and Center for Substance Abuse Prevention (SAMHSA/CSAP) Prevention Enhancement Protocols System (PEPS); the Public Health Service (PHS) Preventive Services Task Force's *Guide to Clinical Preventive Services*; the independent, nonfederal Task Force on Community Services' *Guide to Community Preventive Services*; and the Health Technology Advisory Committee (HTAC) of the Minnesota Health Care Commission (MHCC) health technology evaluations.

²¹ Adapted from <http://www.ncbi.nlm.nih.gov/Coffeebreak/Archive/FAQ.html>.

²² The figure that accompanies each article is frequently supplied by an expert external to NCBI, in which case the source of the figure is cited. The result is an interactive tutorial that tells a biological story.

²³ After a brief introduction that sets the work described into a broader context, the report focuses on how a molecular understanding can provide explanations of observed biology and lead to therapies for diseases. Each vignette is accompanied by a figure and hypertext links that lead to a series of pages that interactively show how NCBI tools and resources are used in the research process.

Other Commercial Databases

In addition to resources maintained by official agencies, other databases exist that are commercial ventures addressing medical professionals. Here are some examples that may interest you:

- **CliniWeb International:** Index and table of contents to selected clinical information on the Internet; see <http://www.ohsu.edu/clinweb/>.
- **Medical World Search:** Searches full text from thousands of selected medical sites on the Internet; see <http://www.mwsearch.com/>.

APPENDIX B. PATIENT RESOURCES

Overview

Official agencies, as well as federally funded institutions supported by national grants, frequently publish a variety of guidelines written with the patient in mind. These are typically called “Fact Sheets” or “Guidelines.” They can take the form of a brochure, information kit, pamphlet, or flyer. Often they are only a few pages in length. Since new guidelines on alternative medicine can appear at any moment and be published by a number of sources, the best approach to finding guidelines is to systematically scan the Internet-based services that post them.

Patient Guideline Sources

The remainder of this chapter directs you to sources which either publish or can help you find additional guidelines on topics related to alternative medicine. Due to space limitations, these sources are listed in a concise manner. Do not hesitate to consult the following sources by either using the Internet hyperlink provided, or, in cases where the contact information is provided, contacting the publisher or author directly.

The National Institutes of Health

The NIH gateway to patients is located at <http://health.nih.gov/>. From this site, you can search across various sources and institutes, a number of which are summarized below.

Topic Pages: MEDLINEplus

The National Library of Medicine has created a vast and patient-oriented healthcare information portal called MEDLINEplus. Within this Internet-based system are “health topic pages” which list links to available materials relevant to alternative medicine. To access this system, log on to <http://www.nlm.nih.gov/medlineplus/healthtopics.html>. From there you can either search using the alphabetical index or browse by broad topic areas. Recently, MEDLINEplus listed the following when searched for “alternative medicine”:

- Other Guides

Arthritis

<http://www.nlm.nih.gov/medlineplus/arthritis.html>

Cancer

<http://www.nlm.nih.gov/medlineplus/cancergeneral.html>

Cancer Alternative Therapy

<http://www.nlm.nih.gov/medlineplus/canceralternativetherapy.html>

Cancer Alternative Therapy

<http://www.nlm.nih.gov/medlineplus/canceralternativetherapy.html>

Herbal Medicine

<http://www.nlm.nih.gov/medlineplus/herbalmedicine.html>

Osteoarthritis

<http://www.nlm.nih.gov/medlineplus/osteoarthritis.html>

Rheumatoid Arthritis

<http://www.nlm.nih.gov/medlineplus/rheumatoidarthritis.html>

Within the health topic page dedicated to alternative medicine, the following was listed:

- Specific Conditions/Aspects

About CAM on PubMed

Source: National Center for Complementary and Alternative Medicine

<http://www.nlm.nih.gov/nccam/camonpubmed.html>

Aromatherapy

Source: Harvard Medical School, IntelliHealth, Natural Standard

<http://www.intelihealth.com/IH/ihIHI/WSIHW000/8513/34968/360050.html?d=dmtContent>

Art Therapy Frequently Asked Questions

Source: American Art Therapy Association

<http://www.arttherapy.org/aboutarttherapy/faqs.htm>

Ayurveda

Source: Mayo Foundation for Medical Education and Research

<http://www.mayoclinic.com/invoke.cfm?id=SA00090>

Biofeedback

Source: Mayo Foundation for Medical Education and Research

<http://www.mayoclinic.com/invoke.cfm?id=SA00083>

Homeopathy

Source: Mayo Foundation for Medical Education and Research

<http://www.mayoclinic.com/invoke.cfm?id=SA00089>

How Can Spirituality Affect Your Family's Health?

Source: Nemours Foundation

<http://kidshealth.org/parent/positive/family/spirituality.html>

Hypnosis

Source: Mayo Foundation for Medical Education and Research

<http://www.mayoclinic.com/invoke.cfm?id=SA00084>

Laughter and Medicine: How Humor Can Help You Heal

Source: Mayo Foundation for Medical Education and Research
<http://www.mayoclinic.com/invoke.cfm?id=HQ00987>

Magnet Therapy

Source: Harvard Medical School, IntelliHealth, Natural Standard
<http://www.intelihealth.com/IH/ihtIH/WSIHW000/8513/34968/358833.html?d=dmtContent>

Massage

Source: Mayo Foundation for Medical Education and Research
<http://www.mayoclinic.com/invoke.cfm?id=SA00082>

OMT: Hands-on Care

Source: American Osteopathic Association
<http://www.aoa-net.org/Consumers/omt.htm>

Overview of Dietary Supplements

Source: Food and Drug Administration
<http://vm.cfsan.fda.gov/%7Edms/ds-oview.html>

Oxygen Bars: Is a Breath of Fresh Air Worth It?

Source: Food and Drug Administration
http://www.fda.gov/fdac/features/2002/602_air.html

Questions and Answers about Homeopathy

Source: National Center for Complementary and Alternative Medicine
<http://nccam.nih.gov/health/homeopathy/index.htm>

Reflexology

Source: Harvard Medical School, IntelliHealth, Natural Standard
<http://www.intelihealth.com/IH/ihtIH/WSIHW000/8513/34968/360060.html?d=dmtContent>

Relaxation Techniques

Source: Mayo Foundation for Medical Education and Research
<http://www.mayoclinic.com/invoke.cfm?id=HQ01304>

Selecting a Complementary and Alternative Medicine (CAM) Practitioner

Source: National Center for Complementary and Alternative Medicine
<http://nccam.nih.gov/health/practitioner/index.htm>

Truth about Choosing Medical Treatments

<http://www.fda.gov/opacom/lowlit/medfraud.html>

Yoga

Source: Harvard Medical School, Natural Standard
<http://www.intelihealth.com/IH/ihtIH/WSIHW000/8513/34968/358876.html?d=dmtContent>

- Children

Alternative Medicine and Your Child

Source: Nemours Foundation
http://kidshealth.org/parent/general/sick/alternative_medicine.html

- From the National Institutes of Health
 - Are You Considering Using Complementary and Alternative Medicine Therapies (CAM)?**
Source: National Center for Complementary and Alternative Medicine
<http://nccam.nih.gov/health/decisions/>
 - What Is Complementary and Alternative Medicine (CAM)?**
Source: National Center for Complementary and Alternative Medicine
<http://nccam.nih.gov/health/whatiscam/>
- Latest News
 - Positive Effects of Meditation Proven**
Source: 08/18/2003, United Press International
http://www.nlm.nih.gov/www.nlm.nih.gov/medlineplus/news/fullstory_13716.html
 - Scientists Turn to Sage to Combat Alzheimers**
Source: 08/29/2003, Reuters Health
http://www.nlm.nih.gov/www.nlm.nih.gov/medlineplus/news/fullstory_13840.html
- Law and Policy
 - Consumer Financial Issues in Complementary and Alternative Medicine**
Source: National Center for Complementary and Alternative Medicine
<http://nccam.nih.gov/health/financial/index.htm>
 - Swiss Company Charged by FTC with Making Unsubstantiated Health Claims**
Source: Federal Trade Commission
<http://www.ftc.gov/opa/2003/01/drclark.htm>
 - What Are Dietary Supplements?**
Source: National Institutes of Health, Office of Dietary Supplements
<http://ods.od.nih.gov/showpage.aspx?pageid=46>
- Lists of Print Publications
 - Combined Health Information Database: Complementary and Alternative Medicine**
Source: National Center for Complementary and Alternative Medicine
<http://chid.nih.gov/simple/simple.html>
- Organizations
 - Alternative Medicine Foundation**
<http://www.amfoundation.org/>
 - National Center for Complementary and Alternative Medicine**
<http://nccam.nih.gov/>
 - Office of Dietary Supplements**
Source: National Institutes of Health, Office of Dietary Supplements
<http://dietary-supplements.info.nih.gov>

- Teenagers

Alternative Medicine

Source: Nemours Foundation

http://kidshealth.org/teen/your_body/medical_care/alternative_medicine.html

You may also choose to use the search utility provided by MEDLINEplus at the following Web address: <http://www.nlm.nih.gov/medlineplus/>. Simply type a keyword into the search box and click "Search." This utility is similar to the NIH search utility, with the exception that it only includes materials that are linked within the MEDLINEplus system (mostly patient-oriented information). It also has the disadvantage of generating unstructured results. We recommend, therefore, that you use this method only if you have a very targeted search.

The Combined Health Information Database (CHID)

CHID Online is a reference tool that maintains a database directory of thousands of journal articles and patient education guidelines on alternative medicine. CHID offers summaries that describe the guidelines available, including contact information and pricing. CHID's general Web site is <http://chid.nih.gov/>. To search this database, go to <http://chid.nih.gov/detail/detail.html>. In particular, you can use the advanced search options to look up pamphlets, reports, brochures, and information kits. The following was recently posted in this archive:

- **Alternative Medicine in Cancer: Opening Doors to Research**

Source: Bethesda, MD: National Cancer Institute. 2001. 3 p.

Contact: Available from National Cancer Institute. Publications Ordering Service, P.O. Box 24128, Baltimore, MD 21227. (800) 4-CANCER or (800) 422-6237; TTY: (800) 332-8615; FAX: (301) 330-7968. PRICE: Free. NIH Publication Number: 01-4808.

Summary: This brochure discusses the National Cancer Institute's Best Case Series Program. It explains the process for presenting a Best Case Series, including three steps: submitting required documentation, submitting pathology and radiology materials, and presenting Best Case Series to the Cancer Advisory Panel for Complementary and Alternative Medicine (CAPCAM). Practitioners may submit videotaped patient interviews. The brochure includes questions and answers about the potential benefits of presenting a Best Case Series, expertise needed, characteristics of patient reports, and required information. Contact information for submitting a Best Case Series is provided.

- **Consumer Financial Issues in Complementary and Alternative Medicine**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2003. 12 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D179.

Summary: This fact sheet addresses a number of frequently asked questions about consumer financial issues in complementary and alternative medicine (CAM), including how patients pay for CAM treatments delivered by a practitioner; how consumers can

find out if there are any laws in their state about insurance coverage of a CAM modality; financial questions consumers should ask their insurer and practitioner; how to locate insurance companies that cover CAM; and laws and Government resources regarding insurance coverage. The fact sheet also includes a list of resources where consumers can obtain further information about financial issues and CAM.

- **About the National Center for Complementary and Alternative Medicine**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2002. 2 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D158.

Summary: This document provides background information about the National Center for Complementary and Alternative Medicine (NCCAM), 1 of the 27 institutes and centers that make up the National Institutes of Health. It describes the NCCAM's mission and its four primary areas of focus, including research, research training and career development, outreach, and integration into conventional medicine. The document includes basic information about how NCCAM operates, along with the Web address where people can go for more information.

- **What Is Complementary and Alternative Medicine?**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2002. 5 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D156.

Summary: This fact sheet focuses on what complementary and alternative medicine (CAM) is, including its definition and how complementary medicine and alternative medicine differ from each other. It reviews the five major types of CAM: alternative medical systems, mind-body interventions, biologically based therapies, manipulative and body-based methods, and energy therapies. It ends with a discussion of NCCAM's role in the field of CAM. A dictionary of terms is included.

- **Oregon Center for Complementary and Alternative Medicine**

Source: Portland, OR: Oregon Center for Complementary and Alternative Medicine, Kaiser Permanente Center for Health Research. 2002. 1 p.

Contact: Available from Kaiser Permanente Center for Health Research. 3800 North Interstate Avenue, Portland, OR 97227-1098. (503) 335-2400. PRICE: Free.

Summary: This information sheet lists facts about the Oregon Center for Complementary and Alternative Medicine, including its partners, the three clinical trials and six developmental research projects under way in craniofacial disorders, and its two training programs in complementary and alternative medicine.

- **About Clinical Trials and Complementary and Alternative Medicine**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine Clearinghouse. 2002. 8 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D162.

Summary: This fact sheet provides information about clinical trials, including the definition of clinical trials in general and complementary and alternative medicine (CAM) clinical trials in particular. The first section lists key facts about clinical trials in a bullet format, followed by a series of questions and answers about clinical trials and CAM. The fact sheet discusses NCCAM's role in clinical trials; the types, phases, and common elements of clinical trials; placebos; participation in clinical trials, including protections, benefits, and risks; and how people can get more information about participating in clinical trials. Contact information for various clinical trial resources is listed at the end of the fact sheet.

- **Are You Considering Using Complementary and Alternative Medicine?**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2002. 8 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D167.

Summary: This fact sheet assists consumers in making decisions about using complementary and alternative medicine (CAM). It provides a wide range of information about CAM therapies in a question-and-answer format, including how to get reliable information about CAM therapies, evaluating Web site information about CAM therapies, determining whether the information about the safety and effectiveness of CAM therapies are true, CAM clinical trials, and locating CAM practitioners. Sources where consumers can obtain further information are listed.

- **Selecting a Complementary and Alternative Medicine Practitioner**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2002. 6 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D168.

Summary: This fact sheet assists consumers in selecting a complementary and alternative medicine (CAM) practitioner. In a question-and-answer format, it provides information about how to go about finding a CAM practitioner, how to find out if insurance will cover the cost of a CAM practitioner, how to select a practitioner from a list of several names, questions to ask at the first visit, changing one's mind about treatment or a practitioner, and clinical trials. Sources where consumers can obtain further information are listed at the end of the fact sheet.

- **Complementary and Alternative Medicine in Cancer Treatment: Questions and Answers**

Source: Bethesda, MD: National Cancer Institute. 2001. 6 p.

Contact: Available from National Cancer Institute. Publications Ordering Service, P.O. Box 24128, Baltimore, MD 21227. (800) 4-CANCER or (800) 422-6237; TTY: (800) 332-8615; FAX: (301) 330-7968. PRICE: Free.

Summary: This fact sheet, developed by the National Cancer Institute (NCI), provides a broad range of information about complementary and alternative medicine (CAM) in a question and answer format. It discusses what CAM is, how CAM approaches to cancer treatment are evaluated, what the Best Case Series program is, what types of CAM clinical trials NCI is sponsoring, what questions cancer patients should ask their health care providers when considering CAM therapies, and how patients and their health care providers can learn more about CAM. Contact information is provided for NCI sources, the National Center for Complementary and Alternative Medicine (NCCAM) Clearinghouse, and several other Federal Government agencies. The fact sheet is available in both English and Spanish. 8 references.

- **Chinese Acupuncture**

Contact: University of New Mexico School of Medicine, New Mexico AIDS Education and Training Center, New Mexico AIDS InfoNet, PO Box 810, Arroyo Seco, NM, 87514, (505) 776-8032, <http://www.aidsinfonet.org>.

Summary: This information sheet discusses acupuncture, a technique in traditional Chinese medicine. It provides historical information about acupuncture and examines why it is popular among individuals with human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS). It describes acupuncture as a healing technique that uses very thin needles to stimulate specific points in the body and improve the flow and balance of energy. The information sheet describes the possible risks and side effects associated with acupuncture.

- **Acupuncture Information and Resources Package**

Source: Bethesda, MD: National Center for Complementary and Alternative Medicine (NCCAM). 1999. 16 p.

Contact: Available from National Center for Complementary and Alternative Medicine (NCCAM) Clearinghouse. P.O. Box 8218, Silver Spring, MD 20907-8218. (888) 644-6226. Fax (301) 495-4957. E-mail: nccamc@altmedinfo.org. Website: altmed.od.nih.gov/nccam.

Summary: This fact sheet provides the general public with an overview of acupuncture. This medical procedure, which originated in China more than 2,000 years ago, became widely known in the United States in 1971 when a newspaper reporter wrote about how doctors in Beijing, China, used needles to ease his abdominal pain after surgery. According to Chinese medicine, acupuncture is believed to balance the opposing forces of yin and yang, keep the normal flow of energy unblocked, and restore health to the body and mind. Several processes have been proposed to explain the effects of acupuncture on pain. Acupuncture points are believed to stimulate the central nervous system to release chemicals into the muscles, spinal cord, and brain. Mechanisms through which these chemicals are released include conduction of electromagnetic signals; activation of opioid systems; and changes in brain chemistry, sensation, and involuntary body functions. Clinical studies have shown that acupuncture is an effective treatment for nausea caused by anesthesia and cancer chemotherapy, dental pain

following surgery, and pain from other causes. Research centers supported by the National Center for Complementary and Alternative Medicine are conducting studies on using complementary and alternative medicine to treat specific health conditions and diseases. Various factors influence the effectiveness of acupuncture for different people, so health consumers need to discuss acupuncture with their doctor. Guidelines for selecting a licensed acupuncture practitioner include checking credentials, treatment cost and insurance coverage, and treatment procedures. The fact sheet also includes a list of books, journals, organizations, and Internet resources and a glossary that defines terms italicized in the text. 35 references.

- **Acupuncture**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2002. 12 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D003.

Summary: This fact sheet provides an overview of acupuncture and sources of additional information. It discusses acupuncture theories, proposed mechanisms of action, evidence from clinical studies, FDA's role and the regulation of acupuncture needles, and the sensation of acupuncture. It also describes some of the clinical research sponsored by the National Center for Complementary and Alternative Medicine, and offers guidelines for finding a licensed acupuncture practitioner. It contains a glossary of terms and a list of resources for more information. 36 references.

- **Questions and Answers About Homeopathy**

Source: Gaithersburg, MD: National Center for Complementary and Alternative Medicine. 2003. 14 p.

Contact: Available from National Center for Complementary and Alternative Medicine Clearinghouse. P.O. Box 7923, Gaithersburg, MD 20898. (888) 644-6226; INTERNATIONAL PHONE: (301) 519-3153; TTY: (866) 464-3615; FAX: (866) 464-3616; E-MAIL: info@nccam.nih.gov. PRICE: Free. Publication Number: D183.

Summary: This fact sheet from the National Center for Complementary and Alternative Medicine (NCCAM) answers frequently asked questions on homeopathy and reviews scientific research on its use and effectiveness. It discusses what homeopathy is and the history of the discovery and use of homeopathy, as well as training homeopathic practitioners receive and how they treat patients. The fact sheet also provides information on different types of homeopathic remedies, how the U.S. Food and Drug Administration regulates homeopathic remedies, and side effects or complications reported from the use of homeopathy. It includes a summary of the results from individual clinical trials and broad analyses of groups of clinical trials. It also lists NCCAM-supported research projects on homeopathy and resources patients can use to obtain more information. 45 references. 2 appendices.

Healthfinder™

Healthfinder™ is sponsored by the U.S. Department of Health and Human Services and offers links to hundreds of other sites that contain healthcare information. This Web site is located at <http://www.healthfinder.gov>. Again, keyword searches can be used to find guidelines. The following was recently found in this database:

- **Acupuncture**

Summary: Acupuncture is one of the oldest, most commonly used medical procedures in the world. Research shows that acupuncture is beneficial in treating a variety of health conditions.

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=7457>

- **Acupuncture (Arthritis Foundation)**

Summary: The Chinese therapy of acupuncture has been used for millennia to treat a range of ailments.

Source: Arthritis Foundation

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=7454>

- **Acupuncture and Oriental Medicine Alliance Practitioner Search**

Summary: Directory of national organizations that are involved in the field of medical acupuncture and oriental medicine. Includes addresses -- internet and postal, and phone numbers.

Source: Acupuncture and Oriental Medicine Alliance

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4073>

- **Acupuncture Consensus Statement - National Institutes of Health**

Summary: To address important issues regarding acupuncture, the NIH Office of Alternative Medicine and the NIH Office of Medical Applications of Research organized a 21/2-day conference to evaluate the

Source: NIH Consensus Development Program, Office Medical Applications of Research

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=1275>

- **Acupuncture Information and Resources**

Summary: This online document presents general information about acupuncture, summaries of NIH research findings on acupuncture, information for the health consumer, a list of additional information resources,

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6047>

- **Acupuncture Resource Guide**

Summary: A resource guide for Acupuncture.

Source: Alternative Medicine Foundation, Inc.

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=7609>

- **Addiction & Alternative Medicine**

Summary: This web site presents information about current research efforts to discover complementary and alternative medicine (CAM) therapies for addictions.

Source: Center for Addiction and Alternative Medicine Research

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=2409>

- **AIDS and HIV: Alternative Medicine Resources**

Summary: Links to online resources (articles, news & reports), treatment facilities and agencies related to alternative therapy treatment and HIV/AIDS.

Source: Educational Institution--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4105>

- **Alternative Medicine and Your Child**

Summary: Alternative medicine generally includes any healing practices that are not part of mainstream medicine.

Source: Nemours Foundation

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=7455>

- **Alternative Medicine Homepage, Health Sciences Library System, University of Pittsburgh**

Summary: This page is a jumpstation for sources of information on unconventional, unorthodox, unproven, or alternative, complementary, innovative, integrative therapies.

Source: Educational Institution--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=661>

- **Alternative Medicine Review: A Journal of Clinical Therapeutics**

Summary: This peer-reviewed journal provides accurate, timely and clinically relevant original articles, abstracts and literature reviews to the practicing preventive healthcare professional.

Source: Commercial Entity--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3995>

- **Alternative Medicine--MEDLINEplus**

Summary: Links to news, overviews, clinical trials, research, and organizations related to alternative medicine.

Source: National Library of Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6485>

- **American Academy of Medical Acupuncture: Referral Index**

Summary: A searchable database of medical acupuncturists in the United States and Canada. From this page, users can also link to other acupuncture related resources.

Source: American Academy of Medical Acupuncture

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4009>

- **Calendar and Events - National Center for Complementary and Alternative Medicine (NCCAM)**

Summary: Browse this site for information about meetings, national conferences and other events sponsored or supported by the National Center for Complementary and Alternative Medicine (NCCAM) and related to

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4875>

- **cancer.gov--Complementary and Alternative Medicine Cancer Treatment**

Summary: Healing philosophies, approaches, and therapies used in addition to, or instead of, traditional treatments.

Source: National Cancer Institute, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=5385>

- **Choosing Complementary And Alternative Medicine: Questions To Consider**

Summary: This online consumer health information document provides some

Source: Center for Complementary and Alternative Medicine Research in Aging and Women's Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3901>

- **Complementary & Alternative Medicine (Newsletter)**

Summary: This newsletter is distributed quarterly by the Office of Alternative Medicine/NIH (OAM). It features the latest research reports, highlights and consensus conference statements from OAM.

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=2918>

- **Complementary and Alternative Medicine in Cancer Treatment: Questions and Answers**

Summary: Also available In:

Source: National Cancer Institute, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=2538>

- **Current Bibliographies in Medicine - Acupuncture**

Summary: An online bibliography focusing on acupuncture. Selected trials and other data are organized according to illness and medical specialty.

Source: National Library of Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4003>

- **Diseases & Conditions: Internet Resources for Alternative Medicine**

Summary: Follow these links for information online related to alternative treatment options for this select group of diseases and disorders -- HIV/AIDS, asthma, cancer, epilepsy, headache, herpes, insomnia,

Source: Educational Institution--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3983>

- **FAQ - About Acupuncture**

Summary: The American Academy of Medical Acupuncture answers some commonly asked questions about acupuncture and medical acupuncturists.

Source: American Academy of Medical Acupuncture

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3935>

- **FAQ - About Acupuncture and Oriental Medicine**

Summary: Answers to the most commonly asked questions about oriental medicine and acupuncture: what is oriental medicine, how does acupuncture work -- is it safe, is it painful and for which kinds of ailments

Source: Acupuncture and Oriental Medicine Alliance

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4071>

- **FAQs: Dietary Supplements, Complementary or Alternative Medicines**

Summary: Links to information about taking natural products, dietary supplements, medicinal plants or other complementary or alternative medicines.

Source: National Library of Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6486>

- **Five-Year Strategic Plan -- The National Center for Complementary and Alternative Medicine**

Summary: This page links users to the National Center for Complementary and Alternative Medicine's (NCCAM) Draft Five-Year Strategic Plan as well as to a site for public comment on the report..

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=5191>

- **General Information About the National Center for Complementary and Alternative Medicine**

Summary: This fact sheet presents general information about complementary and alternative medicine (CAM) and an overview of the National Center for Complementary and Alternative Medicine's (NCCAM) efforts to

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6046>

- **HIV/AIDS Information: Putting the Pieces Together Workshop Manual**

Summary: Links to HIV/AIDS resources by format (print materials, audiovisual materials, human resources, telefacsimile and computer resources), and by subject area (alternative medicine, caregiving, drug

Source: Educational Institution--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=5103>

- **Homeopathy Online**

Summary: This page is a bulletin board service for the homeopathic community. It includes classifieds or announcements regarding professional education, treatment, material, and trials.

Source: Commercial Entity--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3997>

- **Homeopathy Resource Guide**

Summary: The underlying principle of homeopathy is

Source: Alternative Medicine Foundation, Inc.

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=7614>

- **Homeopathy: Real Medicine or Empty Promises?**

Summary: This article appeared in FDA Consumer magazine. The Food and Drug Administration regulates homeopathic remedies under provisions of the Food, Drug, and Cosmetic Act.

Source: U.S. Food and Drug Administration

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=660>

- **Levels of Evidence for Human Studies of Cancer Complementary and Alternative Medicine**

Summary: This classification system has been developed by the National Cancer Institute's PDQ Adult Treatment Editorial Board to allow the ranking of human cancer treatment studies according to statistical

Source: National Cancer Institute, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6469>

- **Major Domains of Complementary & Alternative Medicine**

Summary: The list of practices that are considered CAM changes continually as CAM practices and therapies that are proven safe and effective become accepted as

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=2540>

- **MedWebPlus: Alternative Medicine**

Summary: MedWebPlus is a free service designed to help users sift through the ever growing amounts of data of/on/about or in any way regarding, the health sciences.

Source: Commercial Entity--Follow the Resource URL for More Information

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=666>

- **National Center for Complementary and Alternative Medicine Research Centers**

Summary: Browse this web site for CAM Research Centers supported by the National Institutes of Health's National Center for Complementary and Alternative Medicine (NCCAM).

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3687>

- **National Center for Homeopathy: Directory**

Summary: A searchable database of homeopathic physicians in the United States and Canada.

Source: National Center for Homeopathy

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=4008>

- **Prostatitis Alternative Medicine FAQ**

Summary: Answers to questions about alternative medical treatment options for prostatitis, a disorder of the prostate gland.

Source: Prostatitis Foundation

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=3925>

- **Questions and Answers: The Phase III Gonzalez Protocol Trial**

Summary: The Gonzalez Protocol Trial is a five-year clinical study funded entirely by the National Institute of Health's National Center for Complementary and Alternative Medicine (NCCAM).

Source: National Cancer Institute, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6466>

- **St. John's Wort and the Treatment of Depression**

Summary: The National Center for Complementary and Alternative Medicine (NCCAM) has developed this fact sheet on the use of St. John's wort for depression.

Source: National Center for Complementary and Alternative Medicine, National Institutes of Health

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=7356>

- **White House Commission on Complementary and Alternative Medicine Policy: Final Report**

Summary: The White House Commission on Complementary and Alternative Medicine Policy (WHCCAMP) was established to address issues related to access and delivery of CAM, priorities for research, and the need for

Source: White House Commission on Complementary and Alternative Medicine Policy

<http://www.healthfinder.gov/scripts/recordpass.asp?RecordType=0&RecordID=6533>

The NIH Search Utility

The NIH search utility allows you to search for documents on over 100 selected Web sites that comprise the NIH-WEB-SPACE. Each of these servers is "crawled" and indexed on an ongoing basis. Your search will produce a list of various documents, all of which will relate in some way to alternative medicine. The drawbacks of this approach are that the information is not organized by theme and that the references are often a mix of information

for professionals and patients. Nevertheless, a large number of the listed Web sites provide useful background information. We can only recommend this route, therefore, for relatively rare or specific disorders, or when using highly targeted searches. To use the NIH search utility, visit the following Web page: <http://search.nih.gov/index.html>.

Additional Web Sources

A number of Web sites are available to the public that often link to government sites. These can also point you in the direction of essential information. The following is a representative sample:

- AOL: <http://search.aol.com/cat.adp?id=168&layer=&from=subcats>
- Family Village: <http://www.familyvillage.wisc.edu/specific.htm>
- Google: http://directory.google.com/Top/Health/Conditions_and_Diseases/
- Med Help International: <http://www.medhelp.org/HealthTopics/A.html>
- Open Directory Project: http://dmoz.org/Health/Conditions_and_Diseases/
- Yahoo.com: http://dir.yahoo.com/Health/Diseases_and_Conditions/
- WebMD®Health: http://my.webmd.com/health_topics

Finding Associations

There are a number of Internet directories that provide lists of medical associations with information on or resources relating to alternative medicine. By consulting all of associations listed in this chapter, you will have nearly exhausted all sources for patient associations concerned with alternative medicine.

The National Health Information Center (NHIC)

The National Health Information Center (NHIC) offers a free referral service to help people find organizations that provide information about alternative medicine. For more information, see the NHIC's Web site at <http://www.health.gov/NHIC/> or contact an information specialist by calling 1-800-336-4797.

Directory of Health Organizations

The Directory of Health Organizations, provided by the National Library of Medicine Specialized Information Services, is a comprehensive source of information on associations. The Directory of Health Organizations database can be accessed via the Internet at <http://www.sis.nlm.nih.gov/Dir/DirMain.html>. It is composed of two parts: DIRLINE and Health Hotlines.

The DIRLINE database comprises some 10,000 records of organizations, research centers, and government institutes and associations that primarily focus on health and biomedicine. To access DIRLINE directly, go to the following Web site: <http://dirline.nlm.nih.gov/>.

Simply type in “alternative medicine” (or a synonym), and you will receive information on all relevant organizations listed in the database.

Health Hotlines directs you to toll-free numbers to over 300 organizations. You can access this database directly at <http://www.sis.nlm.nih.gov/hotlines/>. On this page, you are given the option to search by keyword or by browsing the subject list. When you have received your search results, click on the name of the organization for its description and contact information.

The Combined Health Information Database

Another comprehensive source of information on healthcare associations is the Combined Health Information Database. Using the “Detailed Search” option, you will need to limit your search to “Organizations” and “alternative medicine”. Type the following hyperlink into your Web browser: <http://chid.nih.gov/detail/detail.html>. To find associations, use the drop boxes at the bottom of the search page where “You may refine your search by.” For publication date, select “All Years.” Then, select your preferred language and the format option “Organization Resource Sheet.” Type “alternative medicine” (or synonyms) into the “For these words:” box. You should check back periodically with this database since it is updated every three months.

The National Organization for Rare Disorders, Inc.

The National Organization for Rare Disorders, Inc. has prepared a Web site that provides, at no charge, lists of associations organized by health topic. You can access this database at the following Web site: <http://www.rarediseases.org/search/orgsearch.html>. Type “alternative medicine” (or a synonym) into the search box, and click “Submit Query.”

APPENDIX C. FINDING MEDICAL LIBRARIES

Overview

In this Appendix, we show you how to quickly find a medical library in your area.

Preparation

Your local public library and medical libraries have interlibrary loan programs with the National Library of Medicine (NLM), one of the largest medical collections in the world. According to the NLM, most of the literature in the general and historical collections of the National Library of Medicine is available on interlibrary loan to any library. If you would like to access NLM medical literature, then visit a library in your area that can request the publications for you.²⁴

Finding a Local Medical Library

The quickest method to locate medical libraries is to use the Internet-based directory published by the National Network of Libraries of Medicine (NN/LM). This network includes 4626 members and affiliates that provide many services to librarians, health professionals, and the public. To find a library in your area, simply visit <http://nnlm.gov/members/adv.html> or call 1-800-338-7657.

Medical Libraries in the U.S. and Canada

In addition to the NN/LM, the National Library of Medicine (NLM) lists a number of libraries with reference facilities that are open to the public. The following is the NLM's list and includes hyperlinks to each library's Web site. These Web pages can provide information on hours of operation and other restrictions. The list below is a small sample of

²⁴ Adapted from the NLM: <http://www.nlm.nih.gov/psd/cas/interlibrary.html>.

libraries recommended by the National Library of Medicine (sorted alphabetically by name of the U.S. state or Canadian province where the library is located)²⁵:

- **Alabama:** Health InfoNet of Jefferson County (Jefferson County Library Cooperative, Lister Hill Library of the Health Sciences), <http://www.uab.edu/infonet/>
- **Alabama:** Richard M. Scrushy Library (American Sports Medicine Institute)
- **Arizona:** Samaritan Regional Medical Center: The Learning Center (Samaritan Health System, Phoenix, Arizona), <http://www.samaritan.edu/library/bannerlibs.htm>
- **California:** Kris Kelly Health Information Center (St. Joseph Health System, Humboldt), <http://www.humboldt1.com/~kkhic/index.html>
- **California:** Community Health Library of Los Gatos, <http://www.healthlib.org/orgresources.html>
- **California:** Consumer Health Program and Services (CHIPS) (County of Los Angeles Public Library, Los Angeles County Harbor-UCLA Medical Center Library) - Carson, CA, <http://www.colapublib.org/services/chips.html>
- **California:** Gateway Health Library (Sutter Gould Medical Foundation)
- **California:** Health Library (Stanford University Medical Center), <http://www-med.stanford.edu/healthlibrary/>
- **California:** Patient Education Resource Center - Health Information and Resources (University of California, San Francisco), <http://sfghdean.ucsf.edu/barnett/PERC/default.asp>
- **California:** Redwood Health Library (Petaluma Health Care District), <http://www.phcd.org/rdwdlib.html>
- **California:** Los Gatos PlaneTree Health Library, <http://planetreesanjose.org/>
- **California:** Sutter Resource Library (Sutter Hospitals Foundation, Sacramento), <http://suttermedicalcenter.org/library/>
- **California:** Health Sciences Libraries (University of California, Davis), <http://www.lib.ucdavis.edu/healthsci/>
- **California:** ValleyCare Health Library & Ryan Comer Cancer Resource Center (ValleyCare Health System, Pleasanton), <http://gaelnet.stmarys-ca.edu/other.libs/gbal/east/vchl.html>
- **California:** Washington Community Health Resource Library (Fremont), <http://www.healthlibrary.org/>
- **Colorado:** William V. Gervasini Memorial Library (Exempla Healthcare), <http://www.saintjosephdenver.org/yourhealth/libraries/>
- **Connecticut:** Hartford Hospital Health Science Libraries (Hartford Hospital), <http://www.harthosp.org/library/>
- **Connecticut:** Healthnet: Connecticut Consumer Health Information Center (University of Connecticut Health Center, Lyman Maynard Stowe Library), <http://library.uchc.edu/departm/hnet/>

²⁵ Abstracted from <http://www.nlm.nih.gov/medlineplus/libraries.html>.

- **Connecticut:** Waterbury Hospital Health Center Library (Waterbury Hospital, Waterbury), <http://www.waterburyhospital.com/library/consumer.shtml>
- **Delaware:** Consumer Health Library (Christiana Care Health System, Eugene du Pont Preventive Medicine & Rehabilitation Institute, Wilmington), http://www.christianacare.org/health_guide/health_guide_pmri_health_info.cfm
- **Delaware:** Lewis B. Flinn Library (Delaware Academy of Medicine, Wilmington), <http://www.delamed.org/chls.html>
- **Georgia:** Family Resource Library (Medical College of Georgia, Augusta), http://cmc.mcg.edu/kids_families/fam_resources/fam_res_lib/frl.htm
- **Georgia:** Health Resource Center (Medical Center of Central Georgia, Macon), <http://www.mccg.org/hrc/hrchome.asp>
- **Hawaii:** Hawaii Medical Library: Consumer Health Information Service (Hawaii Medical Library, Honolulu), <http://hml.org/CHIS/>
- **Idaho:** DeArmond Consumer Health Library (Kootenai Medical Center, Coeur d'Alene), <http://www.nicon.org/DeArmond/index.htm>
- **Illinois:** Health Learning Center of Northwestern Memorial Hospital (Chicago), http://www.nmh.org/health_info/hlc.html
- **Illinois:** Medical Library (OSF Saint Francis Medical Center, Peoria), <http://www.osfsaintfrancis.org/general/library/>
- **Kentucky:** Medical Library - Services for Patients, Families, Students & the Public (Central Baptist Hospital, Lexington), <http://www.centralbap.com/education/community/library.cfm>
- **Kentucky:** University of Kentucky - Health Information Library (Chandler Medical Center, Lexington), <http://www.mc.uky.edu/PatientEd/>
- **Louisiana:** Alton Ochsner Medical Foundation Library (Alton Ochsner Medical Foundation, New Orleans), <http://www.ochsner.org/library/>
- **Louisiana:** Louisiana State University Health Sciences Center Medical Library-Shreveport, <http://lib-sh.lsuhscc.edu/>
- **Maine:** Franklin Memorial Hospital Medical Library (Franklin Memorial Hospital, Farmington), <http://www.fchn.org/fmh/lib.htm>
- **Maine:** Gerrish-True Health Sciences Library (Central Maine Medical Center, Lewiston), <http://www.cmmc.org/library/library.html>
- **Maine:** Hadley Parrot Health Science Library (Eastern Maine Healthcare, Bangor), <http://www.emh.org/hll/hpl/guide.htm>
- **Maine:** Maine Medical Center Library (Maine Medical Center, Portland), <http://www.mmc.org/library/>
- **Maine:** Parkview Hospital (Brunswick), <http://www.parkviewhospital.org/>
- **Maine:** Southern Maine Medical Center Health Sciences Library (Southern Maine Medical Center, Biddeford), <http://www.smmc.org/services/service.php3?choice=10>
- **Maine:** Stephens Memorial Hospital's Health Information Library (Western Maine Health, Norway), <http://www.wmhcc.org/Library/>

- **Manitoba, Canada:** Consumer & Patient Health Information Service (University of Manitoba Libraries), <http://www.umanitoba.ca/libraries/units/health/reference/chis.html>
- **Manitoba, Canada:** J.W. Crane Memorial Library (Deer Lodge Centre, Winnipeg), http://www.deerlodge.mb.ca/crane_library/about.asp
- **Maryland:** Health Information Center at the Wheaton Regional Library (Montgomery County, Dept. of Public Libraries, Wheaton Regional Library), <http://www.mont.lib.md.us/healthinfo/hic.asp>
- **Massachusetts:** Baystate Medical Center Library (Baystate Health System), <http://www.baystatehealth.com/1024/>
- **Massachusetts:** Boston University Medical Center Alumni Medical Library (Boston University Medical Center), <http://med-libwww.bu.edu/library/lib.html>
- **Massachusetts:** Lowell General Hospital Health Sciences Library (Lowell General Hospital, Lowell), <http://www.lowellgeneral.org/library/HomePageLinks/WWW.htm>
- **Massachusetts:** Paul E. Woodard Health Sciences Library (New England Baptist Hospital, Boston), http://www.nebh.org/health_lib.asp
- **Massachusetts:** St. Luke's Hospital Health Sciences Library (St. Luke's Hospital, Southcoast Health System, New Bedford), <http://www.southcoast.org/library/>
- **Massachusetts:** Treadwell Library Consumer Health Reference Center (Massachusetts General Hospital), <http://www.mgh.harvard.edu/library/chrcindex.html>
- **Massachusetts:** UMass HealthNet (University of Massachusetts Medical School, Worcester), <http://healthnet.umassmed.edu/>
- **Michigan:** Botsford General Hospital Library - Consumer Health (Botsford General Hospital, Library & Internet Services), <http://www.botsfordlibrary.org/consumer.htm>
- **Michigan:** Helen DeRoy Medical Library (Providence Hospital and Medical Centers), <http://www.providence-hospital.org/library/>
- **Michigan:** Marquette General Hospital - Consumer Health Library (Marquette General Hospital, Health Information Center), <http://www.mgh.org/center.html>
- **Michigan:** Patient Education Resource Center - University of Michigan Cancer Center (University of Michigan Comprehensive Cancer Center, Ann Arbor), <http://www.cancer.med.umich.edu/learn/leares.htm>
- **Michigan:** Sladen Library & Center for Health Information Resources - Consumer Health Information (Detroit), <http://www.henryford.com/body.cfm?id=39330>
- **Montana:** Center for Health Information (St. Patrick Hospital and Health Sciences Center, Missoula)
- **National:** Consumer Health Library Directory (Medical Library Association, Consumer and Patient Health Information Section), <http://caphis.mlanet.org/directory/index.html>
- **National:** National Network of Libraries of Medicine (National Library of Medicine) - provides library services for health professionals in the United States who do not have access to a medical library, <http://nnlm.gov/>
- **National:** NN/LM List of Libraries Serving the Public (National Network of Libraries of Medicine), <http://nnlm.gov/members/>

- **Nevada:** Health Science Library, West Charleston Library (Las Vegas-Clark County Library District, Las Vegas), http://www.lvcld.org/special_collections/medical/index.htm
- **New Hampshire:** Dartmouth Biomedical Libraries (Dartmouth College Library, Hanover), <http://www.dartmouth.edu/~biomed/resources.html#conshealth.html#d/>
- **New Jersey:** Consumer Health Library (Rahway Hospital, Rahway), <http://www.rahwayhospital.com/library.htm>
- **New Jersey:** Dr. Walter Phillips Health Sciences Library (Englewood Hospital and Medical Center, Englewood), <http://www.englewoodhospital.com/links/index.htm>
- **New Jersey:** Meland Foundation (Englewood Hospital and Medical Center, Englewood), <http://www.geocities.com/ResearchTriangle/9360/>
- **New York:** Choices in Health Information (New York Public Library) - NLM Consumer Pilot Project participant, <http://www.nypl.org/branch/health/links.html>
- **New York:** Health Information Center (Upstate Medical University, State University of New York, Syracuse), <http://www.upstate.edu/library/hic/>
- **New York:** Health Sciences Library (Long Island Jewish Medical Center, New Hyde Park), <http://www.lij.edu/library/library.html>
- **New York:** ViaHealth Medical Library (Rochester General Hospital), <http://www.nyam.org/library/>
- **Ohio:** Consumer Health Library (Akron General Medical Center, Medical & Consumer Health Library), <http://www.akrongeneral.org/hwlibrary.htm>
- **Oklahoma:** The Health Information Center at Saint Francis Hospital (Saint Francis Health System, Tulsa), <http://www.sfh-tulsa.com/services/healthinfo.asp>
- **Oregon:** Planetree Health Resource Center (Mid-Columbia Medical Center, The Dalles), <http://www.mcmc.net/phrc/>
- **Pennsylvania:** Community Health Information Library (Milton S. Hershey Medical Center, Hershey), <http://www.hmc.psu.edu/commhealth/>
- **Pennsylvania:** Community Health Resource Library (Geisinger Medical Center, Danville), <http://www.geisinger.edu/education/commlib.shtml>
- **Pennsylvania:** HealthInfo Library (Moses Taylor Hospital, Scranton), <http://www.mth.org/healthwellness.html>
- **Pennsylvania:** Hopwood Library (University of Pittsburgh, Health Sciences Library System, Pittsburgh), http://www.hsls.pitt.edu/guides/chi/hopwood/index_html
- **Pennsylvania:** Koop Community Health Information Center (College of Physicians of Philadelphia), <http://www.collphyphil.org/koopp1.shtml>
- **Pennsylvania:** Learning Resources Center - Medical Library (Susquehanna Health System, Williamsport), <http://www.shscars.org/services/lrc/index.asp>
- **Pennsylvania:** Medical Library (UPMC Health System, Pittsburgh), <http://www.upmc.edu/passavant/library.htm>
- **Quebec, Canada:** Medical Library (Montreal General Hospital), <http://www.mghlib.mcgill.ca/>

- **South Dakota:** Rapid City Regional Hospital Medical Library (Rapid City Regional Hospital), <http://www.rcrh.org/Services/Library/Default.asp>
- **Texas:** Houston HealthWays (Houston Academy of Medicine-Texas Medical Center Library), <http://hhw.library.tmc.edu/>
- **Washington:** Community Health Library (Kittitas Valley Community Hospital), <http://www.kvch.com/>
- **Washington:** Southwest Washington Medical Center Library (Southwest Washington Medical Center, Vancouver), <http://www.swmedicalcenter.com/body.cfm?id=72>

ONLINE GLOSSARIES

The Internet provides access to a number of free-to-use medical dictionaries. The National Library of Medicine has compiled the following list of online dictionaries:

- ADAM Medical Encyclopedia (A.D.A.M., Inc.), comprehensive medical reference:
<http://www.nlm.nih.gov/medlineplus/encyclopedia.html>
- MedicineNet.com Medical Dictionary (MedicineNet, Inc.):
<http://www.medterms.com/Script/Main/hp.asp>
- Merriam-Webster Medical Dictionary (Inteli-Health, Inc.):
<http://www.intelihealth.com/IH/>
- Multilingual Glossary of Technical and Popular Medical Terms in Eight European Languages (European Commission) - Danish, Dutch, English, French, German, Italian, Portuguese, and Spanish: <http://allserv.rug.ac.be/~rvdstich/eugloss/welcome.html>
- On-line Medical Dictionary (CancerWEB): <http://cancerweb.ncl.ac.uk/omd/>
- Rare Diseases Terms (Office of Rare Diseases):
<http://ord.aspensys.com/asp/diseases/diseases.asp>
- Technology Glossary (National Library of Medicine) - Health Care Technology:
<http://www.nlm.nih.gov/nichsr/ta101/ta10108.htm>

Beyond these, MEDLINEplus contains a very patient-friendly encyclopedia covering every aspect of medicine (licensed from A.D.A.M., Inc.). The ADAM Medical Encyclopedia can be accessed at <http://www.nlm.nih.gov/medlineplus/encyclopedia.html>. ADAM is also available on commercial Web sites such as drkoop.com (<http://www.drkoop.com/>) and Web MD (http://my.webmd.com/adam/asset/adam_disease_articles/a_to_z/a). The NIH suggests the following Web sites in the ADAM Medical Encyclopedia when searching for information on alternative medicine:

- **Basic Guidelines for Alternative Medicine**

Acupuncture and pain

Web site: <http://www.nlm.nih.gov/medlineplus/ency/article/002064.htm>

- **Signs & Symptoms for Alternative Medicine**

Back pain

Web site: <http://www.nlm.nih.gov/medlineplus/ency/article/003108.htm>

Headache

Web site: <http://www.nlm.nih.gov/medlineplus/ency/article/003024.htm>

- **Background Topics for Alternative Medicine**

- **Pain reliever**

- Web site: <http://www.nlm.nih.gov/medlineplus/ency/article/002123.htm>

Online Dictionary Directories

The following are additional online directories compiled by the National Library of Medicine, including a number of specialized medical dictionaries:

- Medical Dictionaries: Medical & Biological (World Health Organization):
<http://www.who.int/hlt/virtuallibrary/English/diction.htm#Medical>
- MEL-Michigan Electronic Library List of Online Health and Medical Dictionaries (Michigan Electronic Library): **<http://mel.lib.mi.us/health/health-dictionaries.html>**
- Patient Education: Glossaries (DMOZ Open Directory Project):
http://dmoz.org/Health/Education/Patient_Education/Glossaries/
- Web of Online Dictionaries (Bucknell University):
<http://www.yourdictionary.com/diction5.html#medicine>

ALTERNATIVE MEDICINE DICTIONARY

The definitions below are derived from official public sources, including the National Institutes of Health [NIH] and the European Union [EU].

3-dimensional: 3-D. A graphic display of depth, width, and height. Three-dimensional radiation therapy uses computers to create a 3-dimensional picture of the tumor. This allows doctors to give the highest possible dose of radiation to the tumor, while sparing the normal tissue as much as possible. [NIH]

Abdomen: That portion of the body that lies between the thorax and the pelvis. [NIH]

Abdominal: Having to do with the abdomen, which is the part of the body between the chest and the hips that contains the pancreas, stomach, intestines, liver, gallbladder, and other organs. [NIH]

Abdominal Pain: Sensation of discomfort, distress, or agony in the abdominal region. [NIH]

Abscess: Accumulation of purulent material in tissues, organs, or circumscribed spaces, usually associated with signs of infection. [NIH]

Acceptor: A substance which, while normally not oxidized by oxygen or reduced by hydrogen, can be oxidized or reduced in presence of a substance which is itself undergoing oxidation or reduction. [NIH]

Acculturation: Process of cultural change in which one group or members of a group assimilates various cultural patterns from another. [NIH]

Acetylcholine: A neurotransmitter. Acetylcholine in vertebrates is the major transmitter at neuromuscular junctions, autonomic ganglia, parasympathetic effector junctions, a subset of sympathetic effector junctions, and at many sites in the central nervous system. It is generally not used as an administered drug because it is broken down very rapidly by cholinesterases, but it is useful in some ophthalmological applications. [NIH]

Achievement: Success in bringing an effort to the desired end; the degree or level of success attained in some specified area (esp. scholastic) or in general. [NIH]

Acquired Immunodeficiency Syndrome: An acquired defect of cellular immunity associated with infection by the human immunodeficiency virus (HIV), a CD4-positive T-lymphocyte count under 200 cells/microliter or less than 14% of total lymphocytes, and increased susceptibility to opportunistic infections and malignant neoplasms. Clinical manifestations also include emaciation (wasting) and dementia. These elements reflect criteria for AIDS as defined by the CDC in 1993. [NIH]

Acupuncture Analgesia: Analgesia produced by the insertion of acupuncture needles at certain points in the body. These activate the small myelinated nerve fibers in the muscle which transmit impulses to the spinal cord and then activate three centers - the spinal cord, midbrain and pituitary hypothalamus - to produce analgesia. [NIH]

Acupuncture Points: Designated locations along nerves or organ meridians for inserting acupuncture needles. [NIH]

Acupuncture Therapy: Treatment of disease by inserting needles along specific pathways or meridians. The placement varies with the disease being treated. Heat or moxibustion and acupressure may be used in conjunction. [NIH]

Adaptation: 1. the adjustment of an organism to its environment, or the process by which it enhances such fitness. 2. the normal ability of the eye to adjust itself to variations in the

intensity of light; the adjustment to such variations. 3. the decline in the frequency of firing of a neuron, particularly of a receptor, under conditions of constant stimulation. 4. in dentistry, (a) the proper fitting of a denture, (b) the degree of proximity and interlocking of restorative material to a tooth preparation, (c) the exact adjustment of bands to teeth. 5. in microbiology, the adjustment of bacterial physiology to a new environment. [EU]

Adjunctive therapy: Another treatment used together with the primary treatment. Its purpose is to assist the primary treatment. [NIH]

Adjustment: The dynamic process wherein the thoughts, feelings, behavior, and biophysiological mechanisms of the individual continually change to adjust to the environment. [NIH]

Adolescence: The period of life beginning with the appearance of secondary sex characteristics and terminating with the cessation of somatic growth. The years usually referred to as adolescence lie between 13 and 18 years of age. [NIH]

Adrenal Cortex: The outer layer of the adrenal gland. It secretes mineralocorticoids, androgens, and glucocorticoids. [NIH]

Adrenaline: A hormone. Also called epinephrine. [NIH]

Adrenergic: Activated by, characteristic of, or secreting epinephrine or substances with similar activity; the term is applied to those nerve fibres that liberate norepinephrine at a synapse when a nerve impulse passes, i.e., the sympathetic fibres. [EU]

Adverse effect: An unwanted side effect of treatment. [NIH]

Affinity: 1. inherent likeness or relationship. 2. a special attraction for a specific element, organ, or structure. 3. chemical affinity; the force that binds atoms in molecules; the tendency of substances to combine by chemical reaction. 4. the strength of noncovalent chemical binding between two substances as measured by the dissociation constant of the complex. 5. in immunology, a thermodynamic expression of the strength of interaction between a single antigen-binding site and a single antigenic determinant (and thus of the stereochemical compatibility between them), most accurately applied to interactions among simple, uniform antigenic determinants such as haptens. Expressed as the association constant (K litres mole⁻¹), which, owing to the heterogeneity of affinities in a population of antibody molecules of a given specificity, actually represents an average value (mean intrinsic association constant). 6. the reciprocal of the dissociation constant. [EU]

Agonist: In anatomy, a prime mover. In pharmacology, a drug that has affinity for and stimulates physiologic activity at cell receptors normally stimulated by naturally occurring substances. [EU]

Alimentary: Pertaining to food or nutritive material, or to the organs of digestion. [EU]

Alpha Particles: Positively charged particles composed of two protons and two neutrons, i.e., helium nuclei, emitted during disintegration of very heavy isotopes; a beam of alpha particles or an alpha ray has very strong ionizing power, but weak penetrability. [NIH]

Alpha-1: A protein with the property of inactivating proteolytic enzymes such as leucocyte collagenase and elastase. [NIH]

Alternative medicine: Practices not generally recognized by the medical community as standard or conventional medical approaches and used instead of standard treatments. Alternative medicine includes the taking of dietary supplements, megadose vitamins, and herbal preparations; the drinking of special teas; and practices such as massage therapy, magnet therapy, spiritual healing, and meditation. [NIH]

Altruism: Consideration and concern for other people, as opposed to self-love or egoism, which can be a motivating influence. [NIH]

Amino acid: Any organic compound containing an amino (-NH₂) and a carboxyl (-COOH) group. The 20 α-amino acids listed in the accompanying table are the amino acids from which proteins are synthesized by formation of peptide bonds during ribosomal translation of messenger RNA; all except glycine, which is not optically active, have the L configuration. Other amino acids occurring in proteins, such as hydroxyproline in collagen, are formed by posttranslational enzymatic modification of amino acid residues in polypeptide chains. There are also several important amino acids, such as the neurotransmitter γ-aminobutyric acid, that have no relation to proteins. Abbreviated AA. [EU]

Amitriptyline: Tricyclic antidepressant with anticholinergic and sedative properties. It appears to prevent the re-uptake of norepinephrine and serotonin at nerve terminals, thus potentiating the action of these neurotransmitters. Amitriptyline also appears to antagonize cholinergic and α-1 adrenergic responses to bioactive amines. [NIH]

Amoxicillin: A broad-spectrum semisynthetic antibiotic similar to ampicillin except that its resistance to gastric acid permits higher serum levels with oral administration. [NIH]

Ampicillin: Semi-synthetic derivative of penicillin that functions as an orally active broad-spectrum antibiotic. [NIH]

Anaesthesia: Loss of feeling or sensation. Although the term is used for loss of tactile sensibility, or of any of the other senses, it is applied especially to loss of the sensation of pain, as it is induced to permit performance of surgery or other painful procedures. [EU]

Anal: Having to do with the anus, which is the posterior opening of the large bowel. [NIH]

Analgesic: An agent that alleviates pain without causing loss of consciousness. [EU]

Analogue: In chemistry, a substance that is similar, but not identical, to another. [NIH]

Anaphylatoxins: The family of peptides C3a, C4a, C5a, and C5a des-arginine produced in the serum during complement activation. They produce smooth muscle contraction, mast cell histamine release, affect platelet aggregation, and act as mediators of the local inflammatory process. The order of anaphylatoxin activity from strongest to weakest is C5a, C3a, C4a, and C5a des-arginine. The latter is the so-called "classical" anaphylatoxin but shows no spasmogenic activity though it contains some chemotactic ability. [NIH]

Anaplasia: Loss of structural differentiation and useful function of neoplastic cells. [NIH]

Anatomical: Pertaining to anatomy, or to the structure of the organism. [EU]

Androgens: A class of sex hormones associated with the development and maintenance of the secondary male sex characteristics, sperm induction, and sexual differentiation. In addition to increasing virility and libido, they also increase nitrogen and water retention and stimulate skeletal growth. [NIH]

Anesthesia: A state characterized by loss of feeling or sensation. This depression of nerve function is usually the result of pharmacologic action and is induced to allow performance of surgery or other painful procedures. [NIH]

Animal model: An animal with a disease either the same as or like a disease in humans. Animal models are used to study the development and progression of diseases and to test new treatments before they are given to humans. Animals with transplanted human cancers or other tissues are called xenograft models. [NIH]

Antiallergic: Counteracting allergy or allergic conditions. [EU]

Antibacterial: A substance that destroys bacteria or suppresses their growth or reproduction. [EU]

Antibiotic: A drug used to treat infections caused by bacteria and other microorganisms. [NIH]

Antibodies: Immunoglobulin molecules having a specific amino acid sequence by virtue of which they interact only with the antigen that induced their synthesis in cells of the lymphoid series (especially plasma cells), or with an antigen closely related to it. [NIH]

Antibody: A type of protein made by certain white blood cells in response to a foreign substance (antigen). Each antibody can bind to only a specific antigen. The purpose of this binding is to help destroy the antigen. Antibodies can work in several ways, depending on the nature of the antigen. Some antibodies destroy antigens directly. Others make it easier for white blood cells to destroy the antigen. [NIH]

Anticholinergic: An agent that blocks the parasympathetic nerves. Called also parasympatholytic. [EU]

Antidepressant: A drug used to treat depression. [NIH]

Antigen: Any substance which is capable, under appropriate conditions, of inducing a specific immune response and of reacting with the products of that response, that is, with specific antibody or specifically sensitized T-lymphocytes, or both. Antigens may be soluble substances, such as toxins and foreign proteins, or particulate, such as bacteria and tissue cells; however, only the portion of the protein or polysaccharide molecule known as the antigenic determinant (q.v.) combines with antibody or a specific receptor on a lymphocyte. Abbreviated Ag. [EU]

Antigen-Antibody Complex: The complex formed by the binding of antigen and antibody molecules. The deposition of large antigen-antibody complexes leading to tissue damage causes immune complex diseases. [NIH]

Antihypertensive: An agent that reduces high blood pressure. [EU]

Anti-inflammatory: Having to do with reducing inflammation. [NIH]

Anti-Inflammatory Agents: Substances that reduce or suppress inflammation. [NIH]

Antineoplastic: Inhibiting or preventing the development of neoplasms, checking the maturation and proliferation of malignant cells. [EU]

Antioxidant: A substance that prevents damage caused by free radicals. Free radicals are highly reactive chemicals that often contain oxygen. They are produced when molecules are split to give products that have unpaired electrons. This process is called oxidation. [NIH]

Anxiety: Persistent feeling of dread, apprehension, and impending disaster. [NIH]

Aqueous: Having to do with water. [NIH]

Arachidonic Acid: An unsaturated, essential fatty acid. It is found in animal and human fat as well as in the liver, brain, and glandular organs, and is a constituent of animal phosphatides. It is formed by the synthesis from dietary linoleic acid and is a precursor in the biosynthesis of prostaglandins, thromboxanes, and leukotrienes. [NIH]

Argyria: A condition induced by the prolonged use of salts of silver. [NIH]

Art Therapy: The use of art as an adjunctive therapy in the treatment of neurological, mental, or behavioral disorders. [NIH]

Arterial: Pertaining to an artery or to the arteries. [EU]

Arteries: The vessels carrying blood away from the heart. [NIH]

Arterioles: The smallest divisions of the arteries located between the muscular arteries and the capillaries. [NIH]

Artery: Vessel-carrying blood from the heart to various parts of the body. [NIH]

Arthropathy: Any joint disease. [EU]

Articular: Of or pertaining to a joint. [EU]

Ascorbic Acid: A six carbon compound related to glucose. It is found naturally in citrus fruits and many vegetables. Ascorbic acid is an essential nutrient in human diets, and necessary to maintain connective tissue and bone. Its biologically active form, vitamin C, functions as a reducing agent and coenzyme in several metabolic pathways. Vitamin C is considered an antioxidant. [NIH]

Atherogenic: Causing the formation of plaque in the lining of the arteries. [NIH]

Atrium: A chamber; used in anatomical nomenclature to designate a chamber affording entrance to another structure or organ. Usually used alone to designate an atrium of the heart. [EU]

Auricular: Pertaining to an auricle or to the ear, and, formerly, to an atrium of the heart. [EU]

Authorship: The profession of writing. Also the identity of the writer as the creator of a literary production. [NIH]

Axotomy: Transection or severing of an axon. This type of denervation is used often in experimental studies on neuronal physiology and neuronal death or survival, toward an understanding of nervous system disease. [NIH]

Back Pain: Acute or chronic pain located in the posterior regions of the trunk, including the thoracic, lumbar, sacral, or adjacent regions. [NIH]

Bacteria: Unicellular prokaryotic microorganisms which generally possess rigid cell walls, multiply by cell division, and exhibit three principal forms: round or coccid, rodlike or bacillary, and spiral or spirochetal. [NIH]

Bacterial Infections: Infections by bacteria, general or unspecified. [NIH]

Bacterial Physiology: Physiological processes and activities of bacteria. [NIH]

Base: In chemistry, the nonacid part of a salt; a substance that combines with acids to form salts; a substance that dissociates to give hydroxide ions in aqueous solutions; a substance whose molecule or ion can combine with a proton (hydrogen ion); a substance capable of donating a pair of electrons (to an acid) for the formation of a coordinate covalent bond. [EU]

Benign: Not cancerous; does not invade nearby tissue or spread to other parts of the body. [NIH]

Bilateral: Affecting both the right and left side of body. [NIH]

Bile: An emulsifying agent produced in the LIVER and secreted into the DUODENUM. Its composition includes BILE ACIDS AND SALTS, CHOLESTEROL, and ELECTROLYTES. It aids DIGESTION of fats in the duodenum. [NIH]

Biochemical: Relating to biochemistry; characterized by, produced by, or involving chemical reactions in living organisms. [EU]

Bioenergy: All forms of energy originating from the transformation of biomasses. [NIH]

Biosynthesis: The building up of a chemical compound in the physiologic processes of a living organism. [EU]

Biotechnology: Body of knowledge related to the use of organisms, cells or cell-derived constituents for the purpose of developing products which are technically, scientifically and clinically useful. Alteration of biologic function at the molecular level (i.e., genetic engineering) is a central focus; laboratory methods used include transfection and cloning technologies, sequence and structure analysis algorithms, computer databases, and gene and protein structure function analysis and prediction. [NIH]

Bladder: The organ that stores urine. [NIH]

Bloating: Fullness or swelling in the abdomen that often occurs after meals. [NIH]

Blood Flow Velocity: A value equal to the total volume flow divided by the cross-sectional area of the vascular bed. [NIH]

Blood pressure: The pressure of blood against the walls of a blood vessel or heart chamber. Unless there is reference to another location, such as the pulmonary artery or one of the heart chambers, it refers to the pressure in the systemic arteries, as measured, for example, in the forearm. [NIH]

Blood vessel: A tube in the body through which blood circulates. Blood vessels include a network of arteries, arterioles, capillaries, venules, and veins. [NIH]

Body Fluids: Liquid components of living organisms. [NIH]

Bone Marrow: The soft tissue filling the cavities of bones. Bone marrow exists in two types, yellow and red. Yellow marrow is found in the large cavities of large bones and consists mostly of fat cells and a few primitive blood cells. Red marrow is a hematopoietic tissue and is the site of production of erythrocytes and granular leukocytes. Bone marrow is made up of a framework of connective tissue containing branching fibers with the frame being filled with marrow cells. [NIH]

Bowel: The long tube-shaped organ in the abdomen that completes the process of digestion. There is both a small and a large bowel. Also called the intestine. [NIH]

Bowel Movement: Body wastes passed through the rectum and anus. [NIH]

Branch: Most commonly used for branches of nerves, but applied also to other structures. [NIH]

Breakdown: A physical, mental, or nervous collapse. [NIH]

Broad-spectrum: Effective against a wide range of microorganisms; said of an antibiotic. [EU]

Bronchi: The larger air passages of the lungs arising from the terminal bifurcation of the trachea. [NIH]

Bronchial: Pertaining to one or more bronchi. [EU]

Calcium: A basic element found in nearly all organized tissues. It is a member of the alkaline earth family of metals with the atomic symbol Ca, atomic number 20, and atomic weight 40. Calcium is the most abundant mineral in the body and combines with phosphorus to form calcium phosphate in the bones and teeth. It is essential for the normal functioning of nerves and muscles and plays a role in blood coagulation (as factor IV) and in many enzymatic processes. [NIH]

Carbohydrate: An aldehyde or ketone derivative of a polyhydric alcohol, particularly of the pentahydric and hexahydric alcohols. They are so named because the hydrogen and oxygen are usually in the proportion to form water, (CH₂O)_n. The most important carbohydrates are the starches, sugars, celluloses, and gums. They are classified into mono-, di-, tri-, poly- and heterosaccharides. [EU]

Carbon Dioxide: A colorless, odorless gas that can be formed by the body and is necessary for the respiration cycle of plants and animals. [NIH]

Carcinogenic: Producing carcinoma. [EU]

Cardiac: Having to do with the heart. [NIH]

Cardiovascular: Having to do with the heart and blood vessels. [NIH]

Cardiovascular disease: Any abnormal condition characterized by dysfunction of the heart and blood vessels. CVD includes atherosclerosis (especially coronary heart disease, which can lead to heart attacks), cerebrovascular disease (e.g., stroke), and hypertension (high blood pressure). [NIH]

Carnitine: Constituent of striated muscle and liver. It is used therapeutically to stimulate gastric and pancreatic secretions and in the treatment of hyperlipoproteinemias. [NIH]

Carotene: The general name for a group of pigments found in green, yellow, and leafy vegetables, and yellow fruits. The pigments are fat-soluble, unsaturated aliphatic hydrocarbons functioning as provitamins and are converted to vitamin A through enzymatic processes in the intestinal wall. [NIH]

Carpal Tunnel Syndrome: A median nerve injury inside the carpal tunnel that results in symptoms of pain, numbness, tingling, clumsiness, and a lack of sweating, which can be caused by work with certain hand and wrist postures. [NIH]

Case report: A detailed report of the diagnosis, treatment, and follow-up of an individual patient. Case reports also contain some demographic information about the patient (for example, age, gender, ethnic origin). [NIH]

Case series: A group or series of case reports involving patients who were given similar treatment. Reports of case series usually contain detailed information about the individual patients. This includes demographic information (for example, age, gender, ethnic origin) and information on diagnosis, treatment, response to treatment, and follow-up after treatment. [NIH]

Causal: Pertaining to a cause; directed against a cause. [EU]

Cavernous Sinus: An irregularly shaped venous space in the dura mater at either side of the sphenoid bone. [NIH]

Cecum: The beginning of the large intestine. The cecum is connected to the lower part of the small intestine, called the ileum. [NIH]

Cell: The individual unit that makes up all of the tissues of the body. All living things are made up of one or more cells. [NIH]

Cell Division: The fission of a cell. [NIH]

Cell Transplantation: Transference of cells within an individual, between individuals of the same species, or between individuals of different species. [NIH]

Cellulose: A polysaccharide with glucose units linked as in cellobiose. It is the chief constituent of plant fibers, cotton being the purest natural form of the substance. As a raw material, it forms the basis for many derivatives used in chromatography, ion exchange materials, explosives manufacturing, and pharmaceutical preparations. [NIH]

Central Nervous System: The main information-processing organs of the nervous system, consisting of the brain, spinal cord, and meninges. [NIH]

Central Nervous System Infections: Pathogenic infections of the brain, spinal cord, and meninges. DNA virus infections; RNA virus infections; bacterial infections; mycoplasma infections; Spirochaetales infections; fungal infections; protozoan infections; helminthiasis; and prion diseases may involve the central nervous system as a primary or secondary process. [NIH]

Cerebral: Of or pertaining of the cerebrum or the brain. [EU]

Cerebral Cortex: The thin layer of gray matter on the surface of the cerebral hemisphere that develops from the telencephalon and folds into gyri. It reaches its highest development in man and is responsible for intellectual faculties and higher mental functions. [NIH]

Cerebral Palsy: Refers to a motor disability caused by a brain dysfunction. [NIH]

Cerebrovascular: Pertaining to the blood vessels of the cerebrum, or brain. [EU]

Cerebrum: The largest part of the brain. It is divided into two hemispheres, or halves, called the cerebral hemispheres. The cerebrum controls muscle functions of the body and also

controls speech, emotions, reading, writing, and learning. [NIH]

Cervical: Relating to the neck, or to the neck of any organ or structure. Cervical lymph nodes are located in the neck; cervical cancer refers to cancer of the uterine cervix, which is the lower, narrow end (the "neck") of the uterus. [NIH]

Chemotactic Factors: Chemical substances that attract or repel cells or organisms. The concept denotes especially those factors released as a result of tissue injury, invasion, or immunologic activity, that attract leukocytes, macrophages, or other cells to the site of infection or insult. [NIH]

Chemotherapy: Treatment with anticancer drugs. [NIH]

Chin: The anatomical frontal portion of the mandible, also known as the mentum, that contains the line of fusion of the two separate halves of the mandible (symphysis menti). This line of fusion divides inferiorly to enclose a triangular area called the mental protuberance. On each side, inferior to the second premolar tooth, is the mental foramen for the passage of blood vessels and a nerve. [NIH]

Chiropractic: A system of treating bodily disorders by manipulation of the spine and other parts, based on the belief that the cause is the abnormal functioning of a nerve. [NIH]

Choline: A basic constituent of lecithin that is found in many plants and animal organs. It is important as a precursor of acetylcholine, as a methyl donor in various metabolic processes, and in lipid metabolism. [NIH]

Cholinergic: Resembling acetylcholine in pharmacological action; stimulated by or releasing acetylcholine or a related compound. [EU]

Chondroitin sulfate: The major glycosaminoglycan (a type of sugar molecule) in cartilage. [NIH]

Chromosome: Part of a cell that contains genetic information. Except for sperm and eggs, all human cells contain 46 chromosomes. [NIH]

Chronic: A disease or condition that persists or progresses over a long period of time. [NIH]

Chronic Disease: Disease or ailment of long duration. [NIH]

Chronic Fatigue Syndrome: Fatigue caused by the combined effects of different types of prolonged fatigue. [NIH]

Chronic prostatitis: Inflammation of the prostate gland, developing slowly and lasting a long time. [NIH]

CIS: Cancer Information Service. The CIS is the National Cancer Institute's link to the public, interpreting and explaining research findings in a clear and understandable manner, and providing personalized responses to specific questions about cancer. Access the CIS by calling 1-800-4-CANCER, or by using the Web site at <http://cis.nci.nih.gov>. [NIH]

Citrus: Any tree or shrub of the Rue family or the fruit of these plants. [NIH]

Clinical Medicine: The study and practice of medicine by direct examination of the patient. [NIH]

Clinical study: A research study in which patients receive treatment in a clinic or other medical facility. Reports of clinical studies can contain results for single patients (case reports) or many patients (case series or clinical trials). [NIH]

Clinical trial: A research study that tests how well new medical treatments or other interventions work in people. Each study is designed to test new methods of screening, prevention, diagnosis, or treatment of a disease. [NIH]

Cloning: The production of a number of genetically identical individuals; in genetic engineering, a process for the efficient replication of a great number of identical DNA

molecules. [NIH]

Coagulation: 1. the process of clot formation. 2. in colloid chemistry, the solidification of a sol into a gelatinous mass; an alteration of a disperse phase or of a dissolved solid which causes the separation of the system into a liquid phase and an insoluble mass called the clot or curd. Coagulation is usually irreversible. 3. in surgery, the disruption of tissue by physical means to form an amorphous residuum, as in electrocoagulation and photocoagulation. [EU]

Cochlea: The part of the internal ear that is concerned with hearing. It forms the anterior part of the labyrinth, is conical, and is placed almost horizontally anterior to the vestibule. [NIH]

Coenzyme: An organic nonprotein molecule, frequently a phosphorylated derivative of a water-soluble vitamin, that binds with the protein molecule (apoenzyme) to form the active enzyme (holoenzyme). [EU]

Cofactor: A substance, microorganism or environmental factor that activates or enhances the action of another entity such as a disease-causing agent. [NIH]

Cohort Studies: Studies in which subsets of a defined population are identified. These groups may or may not be exposed to factors hypothesized to influence the probability of the occurrence of a particular disease or other outcome. Cohorts are defined populations which, as a whole, are followed in an attempt to determine distinguishing subgroup characteristics. [NIH]

Colitis: Inflammation of the colon. [NIH]

Collagen: A polypeptide substance comprising about one third of the total protein in mammalian organisms. It is the main constituent of skin, connective tissue, and the organic substance of bones and teeth. Different forms of collagen are produced in the body but all consist of three alpha-polypeptide chains arranged in a triple helix. Collagen is differentiated from other fibrous proteins, such as elastin, by the content of proline, hydroxyproline, and hydroxylysine; by the absence of tryptophan; and particularly by the high content of polar groups which are responsible for its swelling properties. [NIH]

Colon: The long, coiled, tubelike organ that removes water from digested food. The remaining material, solid waste called stool, moves through the colon to the rectum and leaves the body through the anus. [NIH]

Complement: A term originally used to refer to the heat-labile factor in serum that causes immune cytolysis, the lysis of antibody-coated cells, and now referring to the entire functionally related system comprising at least 20 distinct serum proteins that is the effector not only of immune cytolysis but also of other biologic functions. Complement activation occurs by two different sequences, the classic and alternative pathways. The proteins of the classic pathway are termed 'components of complement' and are designated by the symbols C1 through C9. C1 is a calcium-dependent complex of three distinct proteins C1q, C1r and C1s. The proteins of the alternative pathway (collectively referred to as the properdin system) and complement regulatory proteins are known by semisystematic or trivial names. Fragments resulting from proteolytic cleavage of complement proteins are designated with lower-case letter suffixes, e.g., C3a. Inactivated fragments may be designated with the suffix 'i', e.g. C3bi. Activated components or complexes with biological activity are designated by a bar over the symbol e.g. C1 or C4b,2a. The classic pathway is activated by the binding of C1 to classic pathway activators, primarily antigen-antibody complexes containing IgM, IgG1, IgG3; C1q binds to a single IgM molecule or two adjacent IgG molecules. The alternative pathway can be activated by IgA immune complexes and also by nonimmunologic materials including bacterial endotoxins, microbial polysaccharides, and cell walls. Activation of the classic pathway triggers an enzymatic cascade involving C1, C4, C2 and C3; activation of the

alternative pathway triggers a cascade involving C3 and factors B, D and P. Both result in the cleavage of C5 and the formation of the membrane attack complex. Complement activation also results in the formation of many biologically active complement fragments that act as anaphylatoxins, opsonins, or chemotactic factors. [EU]

Complementary and alternative medicine: CAM. Forms of treatment that are used in addition to (complementary) or instead of (alternative) standard treatments. These practices are not considered standard medical approaches. CAM includes dietary supplements, megadose vitamins, herbal preparations, special teas, massage therapy, magnet therapy, spiritual healing, and meditation. [NIH]

Compliance: Distensibility measure of a chamber such as the lungs (lung compliance) or bladder. Compliance is expressed as a change in volume per unit change in pressure. [NIH]

Computational Biology: A field of biology concerned with the development of techniques for the collection and manipulation of biological data, and the use of such data to make biological discoveries or predictions. This field encompasses all computational methods and theories applicable to molecular biology and areas of computer-based techniques for solving biological problems including manipulation of models and datasets. [NIH]

Conduction: The transfer of sound waves, heat, nervous impulses, or electricity. [EU]

Cones: One type of specialized light-sensitive cells (photoreceptors) in the retina that provide sharp central vision and color vision. [NIH]

Conjunctiva: The mucous membrane that lines the inner surface of the eyelids and the anterior part of the sclera. [NIH]

Conjunctivitis: Inflammation of the conjunctiva, generally consisting of conjunctival hyperaemia associated with a discharge. [EU]

Connective Tissue: Tissue that supports and binds other tissues. It consists of connective tissue cells embedded in a large amount of extracellular matrix. [NIH]

Connective Tissue: Tissue that supports and binds other tissues. It consists of connective tissue cells embedded in a large amount of extracellular matrix. [NIH]

Connective Tissue Cells: A group of cells that includes fibroblasts, cartilage cells, adipocytes, smooth muscle cells, and bone cells. [NIH]

Consciousness: Sense of awareness of self and of the environment. [NIH]

Constipation: Infrequent or difficult evacuation of feces. [NIH]

Consumption: Pulmonary tuberculosis. [NIH]

Contraindications: Any factor or sign that it is unwise to pursue a certain kind of action or treatment, e. g. giving a general anesthetic to a person with pneumonia. [NIH]

Control group: In a clinical trial, the group that does not receive the new treatment being studied. This group is compared to the group that receives the new treatment, to see if the new treatment works. [NIH]

Controlled clinical trial: A clinical study that includes a comparison (control) group. The comparison group receives a placebo, another treatment, or no treatment at all. [NIH]

Controlled study: An experiment or clinical trial that includes a comparison (control) group. [NIH]

Conventional therapy: A currently accepted and widely used treatment for a certain type of disease, based on the results of past research. Also called conventional treatment. [NIH]

Conventional treatment: A currently accepted and widely used treatment for a certain type of disease, based on the results of past research. Also called conventional therapy. [NIH]

Coordination: Muscular or motor regulation or the harmonious cooperation of muscles or groups of muscles, in a complex action or series of actions. [NIH]

Corneum: The superficial layer of the epidermis containing keratinized cells. [NIH]

Coronary: Encircling in the manner of a crown; a term applied to vessels; nerves, ligaments, etc. The term usually denotes the arteries that supply the heart muscle and, by extension, a pathologic involvement of them. [EU]

Coronary Arteriosclerosis: Thickening and loss of elasticity of the coronary arteries. [NIH]

Coronary heart disease: A type of heart disease caused by narrowing of the coronary arteries that feed the heart, which needs a constant supply of oxygen and nutrients carried by the blood in the coronary arteries. When the coronary arteries become narrowed or clogged by fat and cholesterol deposits and cannot supply enough blood to the heart, CHD results. [NIH]

Coronary Thrombosis: Presence of a thrombus in a coronary artery, often causing a myocardial infarction. [NIH]

Corrosion: Irreversible destruction of skin tissue. [NIH]

Corticosteroid: Any of the steroids elaborated by the adrenal cortex (excluding the sex hormones of adrenal origin) in response to the release of corticotrophin (adrenocorticotropic hormone) by the pituitary gland, to any of the synthetic equivalents of these steroids, or to angiotensin II. They are divided, according to their predominant biological activity, into three major groups: glucocorticoids, chiefly influencing carbohydrate, fat, and protein metabolism; mineralocorticoids, affecting the regulation of electrolyte and water balance; and C19 androgens. Some corticosteroids exhibit both types of activity in varying degrees, and others exert only one type of effect. The corticosteroids are used clinically for hormonal replacement therapy, for suppression of ACTH secretion by the anterior pituitary, as antineoplastic, antiallergic, and anti-inflammatory agents, and to suppress the immune response. Called also adrenocortical hormone and corticoid. [EU]

Cortisol: A steroid hormone secreted by the adrenal cortex as part of the body's response to stress. [NIH]

Cranial: Pertaining to the cranium, or to the anterior (in animals) or superior (in humans) end of the body. [EU]

Cranial Nerves: Twelve pairs of nerves that carry general afferent, visceral afferent, special afferent, somatic efferent, and autonomic efferent fibers. [NIH]

Craniocerebral Trauma: Traumatic injuries involving the cranium and intracranial structures (i.e., brain; cranial nerves; meninges; and other structures). Injuries may be classified by whether or not the skull is penetrated (i.e., penetrating vs. nonpenetrating) or whether there is an associated hemorrhage. [NIH]

Credentialing: The recognition of professional or technical competence through registration, certification, licensure, admission to association membership, the award of a diploma or degree, etc. [NIH]

Cross-Sectional Studies: Studies in which the presence or absence of disease or other health-related variables are determined in each member of the study population or in a representative sample at one particular time. This contrasts with longitudinal studies which are followed over a period of time. [NIH]

Curative: Tending to overcome disease and promote recovery. [EU]

Cutaneous: Having to do with the skin. [NIH]

Cytochrome: Any electron transfer hemoprotein having a mode of action in which the

transfer of a single electron is effected by a reversible valence change of the central iron atom of the heme prosthetic group between the +2 and +3 oxidation states; classified as cytochromes a in which the heme contains a formyl side chain, cytochromes b, which contain protoheme or a closely similar heme that is not covalently bound to the protein, cytochromes c in which protoheme or other heme is covalently bound to the protein, and cytochromes d in which the iron-tetrapyrrole has fewer conjugated double bonds than the hemes have. Well-known cytochromes have been numbered consecutively within groups and are designated by subscripts (beginning with no subscript), e.g. cytochromes c, c1, C2, ... New cytochromes are named according to the wavelength in nanometres of the absorption maximum of the a-band of the iron (II) form in pyridine, e.g., c-555. [EU]

Cytochrome b: Cytochromes (electron-transporting proteins) with protoheme or a related heme as the prosthetic group. The prosthetic group is not covalently bound to the protein moiety. [NIH]

Cytokines: Non-antibody proteins secreted by inflammatory leukocytes and some non-leukocytic cells, that act as intercellular mediators. They differ from classical hormones in that they are produced by a number of tissue or cell types rather than by specialized glands. They generally act locally in a paracrine or autocrine rather than endocrine manner. [NIH]

Decision Making: The process of making a selective intellectual judgment when presented with several complex alternatives consisting of several variables, and usually defining a course of action or an idea. [NIH]

Degenerative: Undergoing degeneration : tending to degenerate; having the character of or involving degeneration; causing or tending to cause degeneration. [EU]

Dehydroepiandrosterone: DHEA. A substance that is being studied as a cancer prevention drug. It belongs to the family of drugs called steroids. [NIH]

Dementia: An acquired organic mental disorder with loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning. The dysfunction is multifaceted and involves memory, behavior, personality, judgment, attention, spatial relations, language, abstract thought, and other executive functions. The intellectual decline is usually progressive, and initially spares the level of consciousness. [NIH]

Demyelinating Diseases: Diseases characterized by loss or dysfunction of myelin in the central or peripheral nervous system. [NIH]

Density: The logarithm to the base 10 of the opacity of an exposed and processed film. [NIH]

Dental Care: The total of dental diagnostic, preventive, and restorative services provided to meet the needs of a patient (from Illustrated Dictionary of Dentistry, 1982). [NIH]

Dentists: Individuals licensed to practice dentistry. [NIH]

Dermatology: A medical specialty concerned with the skin, its structure, functions, diseases, and treatment. [NIH]

Detoxification: Treatment designed to free an addict from his drug habit. [EU]

Developed Countries: Countries that have reached a level of economic achievement through an increase of production, per capita income and consumption, and utilization of natural and human resources. [NIH]

Diabetes Mellitus: A heterogeneous group of disorders that share glucose intolerance in common. [NIH]

Diagnostic procedure: A method used to identify a disease. [NIH]

Diaphragm: The musculofibrous partition that separates the thoracic cavity from the abdominal cavity. Contraction of the diaphragm increases the volume of the thoracic cavity

aiding inspiration. [NIH]

Diarrhea: Passage of excessively liquid or excessively frequent stools. [NIH]

Diastolic: Of or pertaining to the diastole. [EU]

Diathesis: A constitution or condition of the body which makes the tissues react in special ways to certain extrinsic stimuli and thus tends to make the person more than usually susceptible to certain diseases. [EU]

Diffusion: The tendency of a gas or solute to pass from a point of higher pressure or concentration to a point of lower pressure or concentration and to distribute itself throughout the available space; a major mechanism of biological transport. [NIH]

Digestion: The process of breakdown of food for metabolism and use by the body. [NIH]

Digestive system: The organs that take in food and turn it into products that the body can use to stay healthy. Waste products the body cannot use leave the body through bowel movements. The digestive system includes the salivary glands, mouth, esophagus, stomach, liver, pancreas, gallbladder, small and large intestines, and rectum. [NIH]

Digestive tract: The organs through which food passes when food is eaten. These organs are the mouth, esophagus, stomach, small and large intestines, and rectum. [NIH]

Diploid: Having two sets of chromosomes. [NIH]

Direct: 1. straight; in a straight line. 2. performed immediately and without the intervention of subsidiary means. [EU]

Disease Progression: The worsening of a disease over time. This concept is most often used for chronic and incurable diseases where the stage of the disease is an important determinant of therapy and prognosis. [NIH]

Disparity: Failure of the two retinal images of an object to fall on corresponding retinal points. [NIH]

Distal: Remote; farther from any point of reference; opposed to proximal. In dentistry, used to designate a position on the dental arch farther from the median line of the jaw. [EU]

Dizziness: An imprecise term which may refer to a sense of spatial disorientation, motion of the environment, or lightheadedness. [NIH]

Double-blind: Pertaining to a clinical trial or other experiment in which neither the subject nor the person administering treatment knows which treatment any particular subject is receiving. [EU]

Drug Interactions: The action of a drug that may affect the activity, metabolism, or toxicity of another drug. [NIH]

Duct: A tube through which body fluids pass. [NIH]

Ectopic: Pertaining to or characterized by ectopia. [EU]

Effector: It is often an enzyme that converts an inactive precursor molecule into an active second messenger. [NIH]

Effector cell: A cell that performs a specific function in response to a stimulus; usually used to describe cells in the immune system. [NIH]

Efficacy: The extent to which a specific intervention, procedure, regimen, or service produces a beneficial result under ideal conditions. Ideally, the determination of efficacy is based on the results of a randomized control trial. [NIH]

Elastic: Susceptible of resisting and recovering from stretching, compression or distortion applied by a force. [EU]

Elastin: The protein that gives flexibility to tissues. [NIH]

Elective: Subject to the choice or decision of the patient or physician; applied to procedures that are advantageous to the patient but not urgent. [EU]

Electroacupuncture: A form of acupuncture using low frequency electrically stimulated needles to produce analgesia and anesthesia and to treat disease. [NIH]

Electrode: Component of the pacing system which is at the distal end of the lead. It is the interface with living cardiac tissue across which the stimulus is transmitted. [NIH]

Electrolyte: A substance that dissociates into ions when fused or in solution, and thus becomes capable of conducting electricity; an ionic solute. [EU]

Electrons: Stable elementary particles having the smallest known negative charge, present in all elements; also called negatrons. Positively charged electrons are called positrons. The numbers, energies and arrangement of electrons around atomic nuclei determine the chemical identities of elements. Beams of electrons are called cathode rays or beta rays, the latter being a high-energy byproduct of nuclear decay. [NIH]

Emaciation: Clinical manifestation of excessive leanness usually caused by disease or a lack of nutrition. [NIH]

Empirical: A treatment based on an assumed diagnosis, prior to receiving confirmatory laboratory test results. [NIH]

Emulsion: A preparation of one liquid distributed in small globules throughout the body of a second liquid. The dispersed liquid is the discontinuous phase, and the dispersion medium is the continuous phase. When oil is the dispersed liquid and an aqueous solution is the continuous phase, it is known as an oil-in-water emulsion, whereas when water or aqueous solution is the dispersed phase and oil or oleaginous substance is the continuous phase, it is known as a water-in-oil emulsion. Pharmaceutical emulsions for which official standards have been promulgated include cod liver oil emulsion, cod liver oil emulsion with malt, liquid petrolatum emulsion, and phenolphthalein in liquid petrolatum emulsion. [EU]

Endocrinology: A subspecialty of internal medicine concerned with the metabolism, physiology, and disorders of the endocrine system. [NIH]

Endometrial: Having to do with the endometrium (the layer of tissue that lines the uterus). [NIH]

Endometriosis: A condition in which tissue more or less perfectly resembling the uterine mucous membrane (the endometrium) and containing typical endometrial granular and stromal elements occurs aberrantly in various locations in the pelvic cavity. [NIH]

Endometrium: The layer of tissue that lines the uterus. [NIH]

Endorphin: Opioid peptides derived from beta-lipotropin. Endorphin is the most potent naturally occurring analgesic agent. It is present in pituitary, brain, and peripheral tissues. [NIH]

Endotoxins: Toxins closely associated with the living cytoplasm or cell wall of certain microorganisms, which do not readily diffuse into the culture medium, but are released upon lysis of the cells. [NIH]

Energetic: Exhibiting energy : strenuous; operating with force, vigour, or effect. [EU]

Enuresis: Involuntary discharge of urine after the age at which urinary control should have been achieved; often used alone with specific reference to involuntary discharge of urine occurring during sleep at night (bed-wetting, nocturnal enuresis). [EU]

Environmental Health: The science of controlling or modifying those conditions, influences, or forces surrounding man which relate to promoting, establishing, and maintaining health. [NIH]

Enzyme: A protein that speeds up chemical reactions in the body. [NIH]

Ephedrine: An alpha- and beta-adrenergic agonist that may also enhance release of norepinephrine. It has been used in the treatment of several disorders including asthma, heart failure, rhinitis, and urinary incontinence, and for its central nervous system stimulatory effects in the treatment of narcolepsy and depression. It has become less extensively used with the advent of more selective agonists. [NIH]

Epidemiologic Studies: Studies designed to examine associations, commonly, hypothesized causal relations. They are usually concerned with identifying or measuring the effects of risk factors or exposures. The common types of analytic study are case-control studies, cohort studies, and cross-sectional studies. [NIH]

Epidemiological: Relating to, or involving epidemiology. [EU]

Epidermis: Nonvascular layer of the skin. It is made up, from within outward, of five layers: 1) basal layer (stratum basale epidermidis); 2) spinous layer (stratum spinosum epidermidis); 3) granular layer (stratum granulosum epidermidis); 4) clear layer (stratum lucidum epidermidis); and 5) horny layer (stratum corneum epidermidis). [NIH]

Esophagus: The muscular tube through which food passes from the throat to the stomach. [NIH]

Evacuation: An emptying, as of the bowels. [EU]

Evoke: The electric response recorded from the cerebral cortex after stimulation of a peripheral sense organ. [NIH]

Extensor: A muscle whose contraction tends to straighten a limb; the antagonist of a flexor. [NIH]

Extracellular: Outside a cell or cells. [EU]

Extracellular Matrix: A meshwork-like substance found within the extracellular space and in association with the basement membrane of the cell surface. It promotes cellular proliferation and provides a supporting structure to which cells or cell lysates in culture dishes adhere. [NIH]

Extraction: The process or act of pulling or drawing out. [EU]

Extremity: A limb; an arm or leg (membrum); sometimes applied specifically to a hand or foot. [EU]

Facial: Of or pertaining to the face. [EU]

Facial Nerve: The 7th cranial nerve. The facial nerve has two parts, the larger motor root which may be called the facial nerve proper, and the smaller intermediate or sensory root. Together they provide efferent innervation to the muscles of facial expression and to the lacrimal and salivary glands, and convey afferent information for taste from the anterior two-thirds of the tongue and for touch from the external ear. [NIH]

Facial Paralysis: Paralysis of the upper and lower muscles of the face on one side, due to inflammation of the facial nerve within the stylomastoid foramen. [NIH]

Family Planning: Programs or services designed to assist the family in controlling reproduction by either improving or diminishing fertility. [NIH]

Family Practice: A medical specialty concerned with the provision of continuing, comprehensive primary health care for the entire family. [NIH]

Fat: Total lipids including phospholipids. [NIH]

Fatigue: The feeling of weariness of mind and body. [NIH]

Feces: The excrement discharged from the intestines, consisting of bacteria, cells exfoliated from the intestines, secretions, chiefly of the liver, and a small amount of food residue. [EU]

Femur: The longest and largest bone of the skeleton, it is situated between the hip and the

knee. [NIH]

Fibrosis: Any pathological condition where fibrous connective tissue invades any organ, usually as a consequence of inflammation or other injury. [NIH]

Fixation: 1. the act or operation of holding, suturing, or fastening in a fixed position. 2. the condition of being held in a fixed position. 3. in psychiatry, a term with two related but distinct meanings : (1) arrest of development at a particular stage, which like regression (return to an earlier stage), if temporary is a normal reaction to setbacks and difficulties but if protracted or frequent is a cause of developmental failures and emotional problems, and (2) a close and suffocating attachment to another person, especially a childhood figure, such as one's mother or father. Both meanings are derived from psychoanalytic theory and refer to 'fixation' of libidinal energy either in a specific erogenous zone, hence fixation at the oral, anal, or phallic stage, or in a specific object, hence mother or father fixation. 4. the use of a fixative (q.v.) to preserve histological or cytological specimens. 5. in chemistry, the process whereby a substance is removed from the gaseous or solution phase and localized, as in carbon dioxide fixation or nitrogen fixation. 6. in ophthalmology, direction of the gaze so that the visual image of the object falls on the fovea centralis. 7. in film processing, the chemical removal of all undeveloped salts of the film emulsion, leaving only the developed silver to form a permanent image. [EU]

Foramen: A natural hole of perforation, especially one in a bone. [NIH]

Forearm: The part between the elbow and the wrist. [NIH]

Fovea: The central part of the macula that provides the sharpest vision. [NIH]

Free Radicals: Highly reactive molecules with an unsatisfied electron valence pair. Free radicals are produced in both normal and pathological processes. They are proven or suspected agents of tissue damage in a wide variety of circumstances including radiation, damage from environment chemicals, and aging. Natural and pharmacological prevention of free radical damage is being actively investigated. [NIH]

Friction: Surface resistance to the relative motion of one body against the rubbing, sliding, rolling, or flowing of another with which it is in contact. [NIH]

Frostbite: Damage to tissues as the result of low environmental temperatures. [NIH]

Gait: Manner or style of walking. [NIH]

Gallbladder: The pear-shaped organ that sits below the liver. Bile is concentrated and stored in the gallbladder. [NIH]

Ganglia: Clusters of multipolar neurons surrounded by a capsule of loosely organized connective tissue located outside the central nervous system. [NIH]

Gastric: Having to do with the stomach. [NIH]

Gastric Acid: Hydrochloric acid present in gastric juice. [NIH]

Gastrin: A hormone released after eating. Gastrin causes the stomach to produce more acid. [NIH]

Gastroenterologist: A doctor who specializes in diagnosing and treating disorders of the digestive system. [NIH]

Gastrointestinal: Refers to the stomach and intestines. [NIH]

Gastrointestinal tract: The stomach and intestines. [NIH]

Gene: The functional and physical unit of heredity passed from parent to offspring. Genes are pieces of DNA, and most genes contain the information for making a specific protein. [NIH]

Generator: Any system incorporating a fixed parent radionuclide from which is produced a

daughter radionuclide which is to be removed by elution or by any other method and used in a radiopharmaceutical. [NIH]

Genital: Pertaining to the genitalia. [EU]

Ginkgo biloba: Exclusive species of the genus Ginkgo, family Ginkgoaceae. It produces extracts of medicinal interest. Ginkgo may refer to the genus or species. [NIH]

Ginseng: An araliaceous genus of plants that contains a number of pharmacologically active agents used as stimulants, sedatives, and tonics, especially in traditional medicine. [NIH]

Gland: An organ that produces and releases one or more substances for use in the body. Some glands produce fluids that affect tissues or organs. Others produce hormones or participate in blood production. [NIH]

Glottis: The vocal apparatus of the larynx, consisting of the true vocal cords (plica vocalis) and the opening between them (rima glottidis). [NIH]

Glucocorticoids: A group of corticosteroids that affect carbohydrate metabolism (gluconeogenesis, liver glycogen deposition, elevation of blood sugar), inhibit corticotropin secretion, and possess pronounced anti-inflammatory activity. They also play a role in fat and protein metabolism, maintenance of arterial blood pressure, alteration of the connective tissue response to injury, reduction in the number of circulating lymphocytes, and functioning of the central nervous system. [NIH]

Glucose: D-Glucose. A primary source of energy for living organisms. It is naturally occurring and is found in fruits and other parts of plants in its free state. It is used therapeutically in fluid and nutrient replacement. [NIH]

Glucose Intolerance: A pathological state in which the fasting plasma glucose level is less than 140 mg per deciliter and the 30-, 60-, or 90-minute plasma glucose concentration following a glucose tolerance test exceeds 200 mg per deciliter. This condition is seen frequently in diabetes mellitus but also occurs with other diseases. [NIH]

Glycosaminoglycan: A type of long, unbranched polysaccharide molecule. Glycosaminoglycans are major structural components of cartilage and are also found in the cornea of the eye. [NIH]

Governing Board: The group in which legal authority is vested for the control of health-related institutions and organizations. [NIH]

Grade: The grade of a tumor depends on how abnormal the cancer cells look under a microscope and how quickly the tumor is likely to grow and spread. Grading systems are different for each type of cancer. [NIH]

Grafting: The operation of transfer of tissue from one site to another. [NIH]

Granulomatous Disease, Chronic: A recessive X-linked defect of leukocyte function in which phagocytic cells ingest but fail to digest bacteria, resulting in recurring bacterial infections with granuloma formation. [NIH]

Gravidity: Pregnancy; the condition of being pregnant, without regard to the outcome. [EU]

Groin: The external junctural region between the lower part of the abdomen and the thigh. [NIH]

Growth: The progressive development of a living being or part of an organism from its earliest stage to maturity. [NIH]

Gynecology: A medical-surgical specialty concerned with the physiology and disorders primarily of the female genital tract, as well as female endocrinology and reproductive physiology. [NIH]

Haematuria: Blood in the urine. [EU]

Haemophilia: A haemorrhagic diathesis occurring in two main forms : (1) haemophilia A (classic haemophilia, factor VIII deficiency), an X-linked disorder due to deficiency of coagulation factor VIII; (2) haemophilia B (factor IX deficiency, Christmas disease), also X-linked, due to deficiency of coagulation factor IX. Both forms are determined by a mutant gene near the telomere of the long arm of the X chromosome (Xq), but a different loci, and are characterized by subcutaneous and intramuscular haemorrhages; bleeding from the mouth, gums, lips, and tongue; haematuria; and haemarthroses. [EU]

Hallucination: A sense perception without a source in the external world; a perception of an external stimulus object in the absence of such an object. [EU]

Haploid: An organism with one basic chromosome set, symbolized by n; the normal condition of gametes in diploids. [NIH]

Headache: Pain in the cranial region that may occur as an isolated and benign symptom or as a manifestation of a wide variety of conditions including subarachnoid hemorrhage; craniocerebral trauma; central nervous system infections; intracranial hypertension; and other disorders. In general, recurrent headaches that are not associated with a primary disease process are referred to as headache disorders (e.g., migraine). [NIH]

Headache Disorders: Common conditions characterized by persistent or recurrent headaches. Headache syndrome classification systems may be based on etiology (e.g., vascular headache, post-traumatic headaches, etc.), temporal pattern (e.g., cluster headache, paroxysmal hemicrania, etc.), and precipitating factors (e.g., cough headache). [NIH]

Health Promotion: Encouraging consumer behaviors most likely to optimize health potentials (physical and psychosocial) through health information, preventive programs, and access to medical care. [NIH]

Health Services: Services for the diagnosis and treatment of disease and the maintenance of health. [NIH]

Health Status: The level of health of the individual, group, or population as subjectively assessed by the individual or by more objective measures. [NIH]

Heart attack: A seizure of weak or abnormal functioning of the heart. [NIH]

Heart failure: Loss of pumping ability by the heart, often accompanied by fatigue, breathlessness, and excess fluid accumulation in body tissues. [NIH]

Hemorrhage: Bleeding or escape of blood from a vessel. [NIH]

Hepatitis: Inflammation of the liver and liver disease involving degenerative or necrotic alterations of hepatocytes. [NIH]

Hepatocytes: The main structural component of the liver. They are specialized epithelial cells that are organized into interconnected plates called lobules. [NIH]

Heredity: 1. the genetic transmission of a particular quality or trait from parent to offspring. 2. the genetic constitution of an individual. [EU]

Herpes: Any inflammatory skin disease caused by a herpesvirus and characterized by the formation of clusters of small vesicles. When used alone, the term may refer to herpes simplex or to herpes zoster. [EU]

Hiccup: A spasm of the diaphragm that causes a sudden inhalation followed by rapid closure of the glottis which produces a sound. [NIH]

Homeopathic remedies: Small doses of medicines, herbs, or both that are believed to stimulate the immune system. [NIH]

Homeostasis: The processes whereby the internal environment of an organism tends to

remain balanced and stable. [NIH]

Hormonal: Pertaining to or of the nature of a hormone. [EU]

Hormone: A substance in the body that regulates certain organs. Hormones such as gastrin help in breaking down food. Some hormones come from cells in the stomach and small intestine. [NIH]

Hormone therapy: Treatment of cancer by removing, blocking, or adding hormones. Also called endocrine therapy. [NIH]

Horny layer: The superficial layer of the epidermis containing keratinized cells. [NIH]

Humeral: 1. of, relating to, or situated in the region of the humerus : brachial. 2. of or belonging to the shoulder. 3. of, relating to, or being any of several body parts that are analogous in structure, function, or location to the humerus or shoulder. [EU]

Hydrogel: A network of cross-linked hydrophilic macromolecules used in biomedical applications. [NIH]

Hydrogen: The first chemical element in the periodic table. It has the atomic symbol H, atomic number 1, and atomic weight 1. It exists, under normal conditions, as a colorless, odorless, tasteless, diatomic gas. Hydrogen ions are protons. Besides the common H1 isotope, hydrogen exists as the stable isotope deuterium and the unstable, radioactive isotope tritium. [NIH]

Hydrophilic: Readily absorbing moisture; hygroscopic; having strongly polar groups that readily interact with water. [EU]

Hydroxylysine: A hydroxylated derivative of the amino acid lysine that is present in certain collagens. [NIH]

Hydroxyproline: A hydroxylated form of the imino acid proline. A deficiency in ascorbic acid can result in impaired hydroxyproline formation. [NIH]

Hyperaemia: An excess of blood in a part; engorgement. [EU]

Hypericum: Genus of perennial plants in the family Clusiaceae (Hypericaceae). Herbal and homeopathic preparations are used for depression, neuralgias, and a variety of other conditions. Contains flavonoids, glycosides, mucilage, tannins, and volatile oils (oils, essential). [NIH]

Hypersensitivity: Altered reactivity to an antigen, which can result in pathologic reactions upon subsequent exposure to that particular antigen. [NIH]

Hypertension: Persistently high arterial blood pressure. Currently accepted threshold levels are 140 mm Hg systolic and 90 mm Hg diastolic pressure. [NIH]

Hypnotherapy: Sleeping-cure. [NIH]

Hypnotic: A drug that acts to induce sleep. [EU]

Hypothalamus: Ventral part of the diencephalon extending from the region of the optic chiasm to the caudal border of the mammillary bodies and forming the inferior and lateral walls of the third ventricle. [NIH]

Id: The part of the personality structure which harbors the unconscious instinctive desires and strivings of the individual. [NIH]

Ileus: Obstruction of the intestines. [EU]

Immune function: Production and action of cells that fight disease or infection. [NIH]

Immune response: The activity of the immune system against foreign substances (antigens). [NIH]

Immune system: The organs, cells, and molecules responsible for the recognition and

disposal of foreign ("non-self") material which enters the body. [NIH]

Immunity: Nonsusceptibility to the invasive or pathogenic effects of foreign microorganisms or to the toxic effect of antigenic substances. [NIH]

Immunization: Deliberate stimulation of the host's immune response. Active immunization involves administration of antigens or immunologic adjuvants. Passive immunization involves administration of immune sera or lymphocytes or their extracts (e.g., transfer factor, immune RNA) or transplantation of immunocompetent cell producing tissue (thymus or bone marrow). [NIH]

Immunodeficiency: The decreased ability of the body to fight infection and disease. [NIH]

Immunodeficiency syndrome: The inability of the body to produce an immune response. [NIH]

Immunosuppression: Deliberate prevention or diminution of the host's immune response. It may be nonspecific as in the administration of immunosuppressive agents (drugs or radiation) or by lymphocyte depletion or may be specific as in desensitization or the simultaneous administration of antigen and immunosuppressive drugs. [NIH]

Impairment: In the context of health experience, an impairment is any loss or abnormality of psychological, physiological, or anatomical structure or function. [NIH]

Implantation: The insertion or grafting into the body of biological, living, inert, or radioactive material. [EU]

In vitro: In the laboratory (outside the body). The opposite of in vivo (in the body). [NIH]

In vivo: In the body. The opposite of in vitro (outside the body or in the laboratory). [NIH]

Incision: A cut made in the body during surgery. [NIH]

Incontinence: Inability to control the flow of urine from the bladder (urinary incontinence) or the escape of stool from the rectum (fecal incontinence). [NIH]

Indicative: That indicates; that points out more or less exactly; that reveals fairly clearly. [EU]

Infarction: A pathological process consisting of a sudden insufficient blood supply to an area, which results in necrosis of that area. It is usually caused by a thrombus, an embolus, or a vascular torsion. [NIH]

Infection: 1. invasion and multiplication of microorganisms in body tissues, which may be clinically unapparent or result in local cellular injury due to competitive metabolism, toxins, intracellular replication, or antigen-antibody response. The infection may remain localized, subclinical, and temporary if the body's defensive mechanisms are effective. A local infection may persist and spread by extension to become an acute, subacute, or chronic clinical infection or disease state. A local infection may also become systemic when the microorganisms gain access to the lymphatic or vascular system. 2. an infectious disease. [EU]

Infection Control: Programs of disease surveillance, generally within health care facilities, designed to investigate, prevent, and control the spread of infections and their causative microorganisms. [NIH]

Infertility: The diminished or absent ability to conceive or produce an offspring while sterility is the complete inability to conceive or produce an offspring. [NIH]

Infiltration: The diffusion or accumulation in a tissue or cells of substances not normal to it or in amounts of the normal. Also, the material so accumulated. [EU]

Inflammation: A pathological process characterized by injury or destruction of tissues caused by a variety of cytologic and chemical reactions. It is usually manifested by typical

signs of pain, heat, redness, swelling, and loss of function. [NIH]

Inflammatory bowel disease: A general term that refers to the inflammation of the colon and rectum. Inflammatory bowel disease includes ulcerative colitis and Crohn's disease. [NIH]

Inguinal: Pertaining to the inguen, or groin. [EU]

Inguinal Hernia: A small part of the large or small intestine or bladder that pushes into the groin. May cause pain and feelings of pressure or burning in the groin. Often requires surgery. [NIH]

Inhalation: The drawing of air or other substances into the lungs. [EU]

Initiation: Mutation induced by a chemical reactive substance causing cell changes; being a step in a carcinogenic process. [NIH]

Inner ear: The labyrinth, comprising the vestibule, cochlea, and semicircular canals. [NIH]

Insight: The capacity to understand one's own motives, to be aware of one's own psychodynamics, to appreciate the meaning of symbolic behavior. [NIH]

Insomnia: Difficulty in going to sleep or getting enough sleep. [NIH]

Internal Medicine: A medical specialty concerned with the diagnosis and treatment of diseases of the internal organ systems of adults. [NIH]

Intervention Studies: Epidemiologic investigations designed to test a hypothesized cause-effect relation by modifying the supposed causal factor(s) in the study population. [NIH]

Intervertebral: Situated between two contiguous vertebrae. [EU]

Intervertebral Disk Displacement: An intervertebral disk in which the nucleus pulposus has protruded through surrounding fibrocartilage. This occurs most frequently in the lower lumbar region. [NIH]

Intestinal: Having to do with the intestines. [NIH]

Intestine: A long, tube-shaped organ in the abdomen that completes the process of digestion. There is both a large intestine and a small intestine. Also called the bowel. [NIH]

Intoxication: Poisoning, the state of being poisoned. [EU]

Intracellular: Inside a cell. [NIH]

Intramuscular: IM. Within or into muscle. [NIH]

Intravenous: IV. Into a vein. [NIH]

Invasive: 1. having the quality of invasiveness. 2. involving puncture or incision of the skin or insertion of an instrument or foreign material into the body; said of diagnostic techniques. [EU]

Involuntary: Reaction occurring without intention or volition. [NIH]

Ion Channels: Gated, ion-selective glycoproteins that traverse membranes. The stimulus for channel gating can be a membrane potential, drug, transmitter, cytoplasmic messenger, or a mechanical deformation. Ion channels which are integral parts of ionotropic neurotransmitter receptors are not included. [NIH]

Ions: An atom or group of atoms that have a positive or negative electric charge due to a gain (negative charge) or loss (positive charge) of one or more electrons. Atoms with a positive charge are known as cations; those with a negative charge are anions. [NIH]

Irritable Bowel Syndrome: A disorder that comes and goes. Nerves that control the muscles in the GI tract are too active. The GI tract becomes sensitive to food, stool, gas, and stress. Causes abdominal pain, bloating, and constipation or diarrhea. Also called spastic colon or mucous colitis. [NIH]

Joint: The point of contact between elements of an animal skeleton with the parts that surround and support it. [NIH]

Kb: A measure of the length of DNA fragments, 1 Kb = 1000 base pairs. The largest DNA fragments are up to 50 kilobases long. [NIH]

Keratoconjunctivitis: Simultaneous inflammation of the cornea and conjunctiva. [NIH]

Keratoconjunctivitis Sicca: Drying and inflammation of the conjunctiva as a result of insufficient lacrimal secretion. When found in association with xerostomia and polyarthritis, it is called Sjogren's syndrome. [NIH]

Labile: 1. gliding; moving from point to point over the surface; unstable; fluctuating. 2. chemically unstable. [EU]

Labyrinth: The internal ear; the essential part of the organ of hearing. It consists of an osseous and a membranous portion. [NIH]

Lacrimal: Pertaining to the tears. [EU]

Large Intestine: The part of the intestine that goes from the cecum to the rectum. The large intestine absorbs water from stool and changes it from a liquid to a solid form. The large intestine is 5 feet long and includes the appendix, cecum, colon, and rectum. Also called colon. [NIH]

Latent: Phoria which occurs at one distance or another and which usually has no troublesome effect. [NIH]

Leukocytes: White blood cells. These include granular leukocytes (basophils, eosinophils, and neutrophils) as well as non-granular leukocytes (lymphocytes and monocytes). [NIH]

Leukotrienes: A family of biologically active compounds derived from arachidonic acid by oxidative metabolism through the 5-lipoxygenase pathway. They participate in host defense reactions and pathophysiological conditions such as immediate hypersensitivity and inflammation. They have potent actions on many essential organs and systems, including the cardiovascular, pulmonary, and central nervous system as well as the gastrointestinal tract and the immune system. [NIH]

Library Services: Services offered to the library user. They include reference and circulation. [NIH]

Ligament: A band of fibrous tissue that connects bones or cartilages, serving to support and strengthen joints. [EU]

Lipid: Fat. [NIH]

Liver: A large, glandular organ located in the upper abdomen. The liver cleanses the blood and aids in digestion by secreting bile. [NIH]

Localized: Cancer which has not metastasized yet. [NIH]

Locomotion: Movement or the ability to move from one place or another. It can refer to humans, vertebrate or invertebrate animals, and microorganisms. [NIH]

Locomotor: Of or pertaining to locomotion; pertaining to or affecting the locomotive apparatus of the body. [EU]

Low Back Pain: Acute or chronic pain in the lumbar or sacral regions, which may be associated with musculo-ligamentous sprains and strains; intervertebral disk displacement; and other conditions. [NIH]

Low-calorie diet: Caloric restriction of about 800 to 1,500 calories (approximately 12 to 15 kcal/kg of body weight) per day. [NIH]

Lumbar: Pertaining to the loins, the part of the back between the thorax and the pelvis. [EU]

Lymphatic: The tissues and organs, including the bone marrow, spleen, thymus, and lymph nodes, that produce and store cells that fight infection and disease. [NIH]

Lymphocyte: A white blood cell. Lymphocytes have a number of roles in the immune system, including the production of antibodies and other substances that fight infection and diseases. [NIH]

Lymphocyte Count: A count of the number of lymphocytes in the blood. [NIH]

Malignant: Cancerous; a growth with a tendency to invade and destroy nearby tissue and spread to other parts of the body. [NIH]

Mastication: The act and process of chewing and grinding food in the mouth. [NIH]

Medial: Lying near the midsagittal plane of the body; opposed to lateral. [NIH]

Medial Forebrain Bundle: A complex group of fibers arising from the basal olfactory regions, the periamygdaloid region, and the septal nuclei, and passing to the lateral hypothalamus. Some fibers continue into the tegmentum. [NIH]

Median Nerve: A major nerve of the upper extremity. In humans, the fibers of the median nerve originate in the lower cervical and upper thoracic spinal cord (usually C6 to T1), travel via the brachial plexus, and supply sensory and motor innervation to parts of the forearm and hand. [NIH]

Medical Records: Recording of pertinent information concerning patient's illness or illnesses. [NIH]

MEDLINE: An online database of MEDLARS, the computerized bibliographic Medical Literature Analysis and Retrieval System of the National Library of Medicine. [NIH]

Membrane: A very thin layer of tissue that covers a surface. [NIH]

Memory: Complex mental function having four distinct phases: (1) memorizing or learning, (2) retention, (3) recall, and (4) recognition. Clinically, it is usually subdivided into immediate, recent, and remote memory. [NIH]

Meninges: The three membranes that cover and protect the brain and spinal cord. [NIH]

Menopause: Permanent cessation of menstruation. [NIH]

Menstrual Cycle: The period of the regularly recurring physiologic changes in the endometrium occurring during the reproductive period in human females and some primates and culminating in partial sloughing of the endometrium (menstruation). [NIH]

Menstruation: The normal physiologic discharge through the vagina of blood and mucosal tissues from the nonpregnant uterus. [NIH]

Mental: Pertaining to the mind; psychic. 2. (L. mentum chin) pertaining to the chin. [EU]

Mental Disorders: Psychiatric illness or diseases manifested by breakdowns in the adaptational process expressed primarily as abnormalities of thought, feeling, and behavior producing either distress or impairment of function. [NIH]

Mental Health: The state wherein the person is well adjusted. [NIH]

Mental Processes: Conceptual functions or thinking in all its forms. [NIH]

Mentors: Senior professionals who provide guidance, direction and support to those persons desirous of improvement in academic positions, administrative positions or other career development situations. [NIH]

Meperidine: 1-Methyl-4-phenyl-4-piperidinecarboxylic acid ethyl ester. A narcotic analgesic that can be used for the relief of most types of moderate to severe pain, including postoperative pain and the pain of labor. Prolonged use may lead to dependence of the morphine type; withdrawal symptoms appear more rapidly than with morphine and are of

shorter duration. [NIH]

Mercury: A silver metallic element that exists as a liquid at room temperature. It has the atomic symbol Hg (from hydrargyrum, liquid silver), atomic number 80, and atomic weight 200.59. Mercury is used in many industrial applications and its salts have been employed therapeutically as purgatives, antisyphilitics, disinfectants, and astringents. It can be absorbed through the skin and mucous membranes which leads to mercury poisoning. Because of its toxicity, the clinical use of mercury and mercurials is diminishing. [NIH]

Mesolimbic: Inner brain region governing emotion and drives. [NIH]

Meta-Analysis: A quantitative method of combining the results of independent studies (usually drawn from the published literature) and synthesizing summaries and conclusions which may be used to evaluate therapeutic effectiveness, plan new studies, etc., with application chiefly in the areas of research and medicine. [NIH]

Metastasis: The spread of cancer from one part of the body to another. Tumors formed from cells that have spread are called "secondary tumors" and contain cells that are like those in the original (primary) tumor. The plural is metastases. [NIH]

MI: Myocardial infarction. Gross necrosis of the myocardium as a result of interruption of the blood supply to the area; it is almost always caused by atherosclerosis of the coronary arteries, upon which coronary thrombosis is usually superimposed. [NIH]

Microbe: An organism which cannot be observed with the naked eye; e. g. unicellular animals, lower algae, lower fungi, bacteria. [NIH]

Microbiology: The study of microorganisms such as fungi, bacteria, algae, archaea, and viruses. [NIH]

Midwifery: The practice of assisting women in childbirth. [NIH]

Mineralocorticoids: A group of corticosteroids primarily associated with the regulation of water and electrolyte balance. This is accomplished through the effect on ion transport in renal tubules, resulting in retention of sodium and loss of potassium. Mineralocorticoid secretion is itself regulated by plasma volume, serum potassium, and angiotensin II. [NIH]

Modification: A change in an organism, or in a process in an organism, that is acquired from its own activity or environment. [NIH]

Molecular: Of, pertaining to, or composed of molecules : a very small mass of matter. [EU]

Molecular Structure: The location of the atoms, groups or ions relative to one another in a molecule, as well as the number, type and location of covalent bonds. [NIH]

Molecule: A chemical made up of two or more atoms. The atoms in a molecule can be the same (an oxygen molecule has two oxygen atoms) or different (a water molecule has two hydrogen atoms and one oxygen atom). Biological molecules, such as proteins and DNA, can be made up of many thousands of atoms. [NIH]

Monitor: An apparatus which automatically records such physiological signs as respiration, pulse, and blood pressure in an anesthetized patient or one undergoing surgical or other procedures. [NIH]

Morphine: The principal alkaloid in opium and the prototype opiate analgesic and narcotic. Morphine has widespread effects in the central nervous system and on smooth muscle. [NIH]

Motor Endplate: The specialized postsynaptic region of a muscle cell. The motor endplate is immediately across the synaptic cleft from the presynaptic axon terminal. Among its anatomical specializations are junctional folds which harbor a high density of cholinergic receptors. [NIH]

Mucins: A secretion containing mucopolysaccharides and protein that is the chief

constituent of mucus. [NIH]

Mucociliary: Pertaining to or affecting the mucus membrane and hairs (including eyelashes, nose hair, ...): mucociliary clearing: the clearance of mucus by ciliary movement (particularly in the respiratory system). [EU]

Mucositis: A complication of some cancer therapies in which the lining of the digestive system becomes inflamed. Often seen as sores in the mouth. [NIH]

Mucus: The viscous secretion of mucous membranes. It contains mucin, white blood cells, water, inorganic salts, and exfoliated cells. [NIH]

Muscle Relaxation: That phase of a muscle twitch during which a muscle returns to a resting position. [NIH]

Muscle tension: A force in a material tending to produce extension; the state of being stretched. [NIH]

Music Therapy: The use of music as an adjunctive therapy in the treatment of neurological, mental, or behavioral disorders. [NIH]

Myelin: The fatty substance that covers and protects nerves. [NIH]

Myocardial infarction: Gross necrosis of the myocardium as a result of interruption of the blood supply to the area; it is almost always caused by atherosclerosis of the coronary arteries, upon which coronary thrombosis is usually superimposed. [NIH]

Myocardial Ischemia: A disorder of cardiac function caused by insufficient blood flow to the muscle tissue of the heart. The decreased blood flow may be due to narrowing of the coronary arteries (coronary arteriosclerosis), to obstruction by a thrombus (coronary thrombosis), or less commonly, to diffuse narrowing of arterioles and other small vessels within the heart. Severe interruption of the blood supply to the myocardial tissue may result in necrosis of cardiac muscle (myocardial infarction). [NIH]

Myocardium: The muscle tissue of the heart composed of striated, involuntary muscle known as cardiac muscle. [NIH]

Naloxone: A specific opiate antagonist that has no agonist activity. It is a competitive antagonist at mu, delta, and kappa opioid receptors. [NIH]

Narcolepsy: A condition of unknown cause characterized by a periodic uncontrollable tendency to fall asleep. [NIH]

Narcotic: 1. pertaining to or producing narcosis. 2. an agent that produces insensibility or stupor, applied especially to the opioids, i.e. to any natural or synthetic drug that has morphine-like actions. [EU]

Nausea: An unpleasant sensation in the stomach usually accompanied by the urge to vomit. Common causes are early pregnancy, sea and motion sickness, emotional stress, intense pain, food poisoning, and various enteroviruses. [NIH]

NCI: National Cancer Institute. NCI, part of the National Institutes of Health of the United States Department of Health and Human Services, is the federal government's principal agency for cancer research. NCI conducts, coordinates, and funds cancer research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer. Access the NCI Web site at <http://cancer.gov>. [NIH]

Neck Pain: Discomfort or more intense forms of pain that are localized to the cervical region. This term generally refers to pain in the posterior or lateral regions of the neck. [NIH]

Necrosis: A pathological process caused by the progressive degradative action of enzymes that is generally associated with severe cellular trauma. It is characterized by mitochondrial swelling, nuclear flocculation, uncontrolled cell lysis, and ultimately cell death. [NIH]

Need: A state of tension or dissatisfaction felt by an individual that impels him to action toward a goal he believes will satisfy the impulse. [NIH]

Needle Sharing: Usage of a single needle among two or more people for injecting drugs. Needle sharing is a high-risk behavior for contracting infectious disease. [NIH]

Neoplasm: A new growth of benign or malignant tissue. [NIH]

Nerve: A cordlike structure of nervous tissue that connects parts of the nervous system with other tissues of the body and conveys nervous impulses to, or away from, these tissues. [NIH]

Nerve Fibers: Slender processes of neurons, especially the prolonged axons that conduct nerve impulses. [NIH]

Nervous System: The entire nerve apparatus composed of the brain, spinal cord, nerves and ganglia. [NIH]

Networks: Pertaining to a nerve or to the nerves, a meshlike structure of interlocking fibers or strands. [NIH]

Neurologic: Having to do with nerves or the nervous system. [NIH]

Neurology: A medical specialty concerned with the study of the structures, functions, and diseases of the nervous system. [NIH]

Neuromuscular: Pertaining to muscles and nerves. [EU]

Neuronal: Pertaining to a neuron or neurons (= conducting cells of the nervous system). [EU]

Neurons: The basic cellular units of nervous tissue. Each neuron consists of a body, an axon, and dendrites. Their purpose is to receive, conduct, and transmit impulses in the nervous system. [NIH]

Neuropathy: A problem in any part of the nervous system except the brain and spinal cord. Neuropathies can be caused by infection, toxic substances, or disease. [NIH]

Neuropeptide: A member of a class of protein-like molecules made in the brain. Neuropeptides consist of short chains of amino acids, with some functioning as neurotransmitters and some functioning as hormones. [NIH]

Neurosis: Functional derangement due to disorders of the nervous system which does not affect the psychic personality of the patient. [NIH]

Neurotransmitters: Endogenous signaling molecules that alter the behavior of neurons or effector cells. Neurotransmitter is used here in its most general sense, including not only messengers that act directly to regulate ion channels, but also those that act through second messenger systems, and those that act at a distance from their site of release. Included are neuromodulators, neuroregulators, neuromediators, and neurohumors, whether or not acting at synapses. [NIH]

Neutrons: Electrically neutral elementary particles found in all atomic nuclei except light hydrogen; the mass is equal to that of the proton and electron combined and they are unstable when isolated from the nucleus, undergoing beta decay. Slow, thermal, epithermal, and fast neutrons refer to the energy levels with which the neutrons are ejected from heavier nuclei during their decay. [NIH]

Neutrophil: A type of white blood cell. [NIH]

Nitrogen: An element with the atomic symbol N, atomic number 7, and atomic weight 14. Nitrogen exists as a diatomic gas and makes up about 78% of the earth's atmosphere by volume. It is a constituent of proteins and nucleic acids and found in all living cells. [NIH]

Norepinephrine: Precursor of epinephrine that is secreted by the adrenal medulla and is a

widespread central and autonomic neurotransmitter. Norepinephrine is the principal transmitter of most postganglionic sympathetic fibers and of the diffuse projection system in the brain arising from the locus ceruleus. It is also found in plants and is used pharmacologically as a sympathomimetic. [NIH]

Normotensive: 1. characterized by normal tone, tension, or pressure, as by normal blood pressure. 2. a person with normal blood pressure. [EU]

Nucleus: A body of specialized protoplasm found in nearly all cells and containing the chromosomes. [NIH]

Nucleus Accumbens: Collection of pleomorphic cells in the caudal part of the anterior horn of the lateral ventricle, in the region of the olfactory tubercle, lying between the head of the caudate nucleus and the anterior perforated substance. It is part of the so-called ventral striatum, a composite structure considered part of the basal ganglia. [NIH]

Nurse Practitioners: Nurses who are specially trained to assume an expanded role in providing medical care under the supervision of a physician. [NIH]

Obstetrics: A medical-surgical specialty concerned with management and care of women during pregnancy, parturition, and the puerperium. [NIH]

Ocular: 1. of, pertaining to, or affecting the eye. 2. eyepiece. [EU]

On-line: A sexually-reproducing population derived from a common parentage. [NIH]

Ophthalmic: Pertaining to the eye. [EU]

Ophthalmology: A surgical specialty concerned with the structure and function of the eye and the medical and surgical treatment of its defects and diseases. [NIH]

Opiate: A remedy containing or derived from opium; also any drug that induces sleep. [EU]

Opium: The air-dried exudate from the unripe seed capsule of the opium poppy, *Papaver somniferum*, or its variant, *P. album*. It contains a number of alkaloids, but only a few - morphine, codeine, and papaverine - have clinical significance. Opium has been used as an analgesic, antitussive, antidiarrheal, and antispasmodic. [NIH]

Opportunistic Infections: An infection caused by an organism which becomes pathogenic under certain conditions, e.g., during immunosuppression. [NIH]

Opsin: A visual pigment protein found in the retinal rods. It combines with retinaldehyde to form rhodopsin. [NIH]

Optic Nerve: The 2nd cranial nerve. The optic nerve conveys visual information from the retina to the brain. The nerve carries the axons of the retinal ganglion cells which sort at the optic chiasm and continue via the optic tracts to the brain. The largest projection is to the lateral geniculate nuclei; other important targets include the superior colliculi and the suprachiasmatic nuclei. Though known as the second cranial nerve, it is considered part of the central nervous system. [NIH]

Oral Health: The optimal state of the mouth and normal functioning of the organs of the mouth without evidence of disease. [NIH]

Osteoarthritis: A progressive, degenerative joint disease, the most common form of arthritis, especially in older persons. The disease is thought to result not from the aging process but from biochemical changes and biomechanical stresses affecting articular cartilage. In the foreign literature it is often called osteoarthrosis deformans. [NIH]

Osteopathic Medicine: A system of therapy and medicine based on the theory that the normal body is a vital mechanical organism whose structural and functional states are of equal importance and is capable of making its own remedies against infections and toxic conditions when there are favorable environmental circumstances and adequate nutrition.

[NIH]

Ownership: The legal relation between an entity (individual, group, corporation, or-profit, secular, government) and an object. The object may be corporeal, such as equipment, or completely a creature of law, such as a patent; it may be movable, such as an animal, or immovable, such as a building. [NIH]

Oxidation: The act of oxidizing or state of being oxidized. Chemically it consists in the increase of positive charges on an atom or the loss of negative charges. Most biological oxidations are accomplished by the removal of a pair of hydrogen atoms (dehydrogenation) from a molecule. Such oxidations must be accompanied by reduction of an acceptor molecule. Univalent o. indicates loss of one electron; divalent o., the loss of two electrons. [EU]

Pain Threshold: Amount of stimulation required before the sensation of pain is experienced. [NIH]

Palliative: 1. affording relief, but not cure. 2. an alleviating medicine. [EU]

Palpation: Application of fingers with light pressure to the surface of the body to determine consistence of parts beneath in physical diagnosis; includes palpation for determining the outlines of organs. [NIH]

Palsy: Disease of the peripheral nervous system occurring usually after many years of increased lead absorption. [NIH]

Pancreas: A mixed exocrine and endocrine gland situated transversely across the posterior abdominal wall in the epigastric and hypochondriac regions. The endocrine portion is comprised of the Islets of Langerhans, while the exocrine portion is a compound acinar gland that secretes digestive enzymes. [NIH]

Pancreatic: Having to do with the pancreas. [NIH]

Pancreatic cancer: Cancer of the pancreas, a salivary gland of the abdomen. [NIH]

Paralysis: Loss of ability to move all or part of the body. [NIH]

Paranasal Sinuses: Air-filled extensions of the respiratory part of the nasal cavity into the frontal, ethmoid, sphenoid, and maxillary cranial bones. They vary in size and form in different individuals and are lined by the ciliated mucous membranes of the nasal cavity. [NIH]

Parity: The number of offspring a female has borne. It is contrasted with gravidity, which refers to the number of pregnancies, regardless of outcome. [NIH]

Parturition: The act or process of given birth to a child. [EU]

Pathogenesis: The cellular events and reactions that occur in the development of disease. [NIH]

Pathologic: 1. indicative of or caused by a morbid condition. 2. pertaining to pathology (= branch of medicine that treats the essential nature of the disease, especially the structural and functional changes in tissues and organs of the body caused by the disease). [EU]

Pathophysiology: Altered functions in an individual or an organ due to disease. [NIH]

Patient Education: The teaching or training of patients concerning their own health needs. [NIH]

Patient Satisfaction: The degree to which the individual regards the health care service or product or the manner in which it is delivered by the provider as useful, effective, or beneficial. [NIH]

Pediatrics: A medical specialty concerned with maintaining health and providing medical care to children from birth to adolescence. [NIH]

Peer Review: An organized procedure carried out by a select committee of professionals in evaluating the performance of other professionals in meeting the standards of their specialty. Review by peers is used by editors in the evaluation of articles and other papers submitted for publication. Peer review is used also in the evaluation of grant applications. It is applied also in evaluating the quality of health care provided to patients. [NIH]

Pelvic: Pertaining to the pelvis. [EU]

Pelvis: The lower part of the abdomen, located between the hip bones. [NIH]

Perception: The ability quickly and accurately to recognize similarities and differences among presented objects, whether these be pairs of words, pairs of number series, or multiple sets of these or other symbols such as geometric figures. [NIH]

Perennial: Lasting through the year or for several years. [EU]

Pericardium: The fibrous sac surrounding the heart and the roots of the great vessels. [NIH]

Perimenopausal: The time of a woman's life when menstrual periods become irregular. Refers to the time near menopause. [NIH]

Peripheral Nervous System: The nervous system outside of the brain and spinal cord. The peripheral nervous system has autonomic and somatic divisions. The autonomic nervous system includes the enteric, parasympathetic, and sympathetic subdivisions. The somatic nervous system includes the cranial and spinal nerves and their ganglia and the peripheral sensory receptors. [NIH]

Phallic: Pertaining to the phallus, or penis. [EU]

Pharmacist: A person trained to prepare and distribute medicines and to give information about them. [NIH]

Pharmacologic: Pertaining to pharmacology or to the properties and reactions of drugs. [EU]

Phosphorylated: Attached to a phosphate group. [NIH]

Photoreceptors: Cells specialized to detect and transduce light. [NIH]

Physical Examination: Systematic and thorough inspection of the patient for physical signs of disease or abnormality. [NIH]

Physical Therapy: The restoration of function and the prevention of disability following disease or injury with the use of light, heat, cold, water, electricity, ultrasound, and exercise. [NIH]

Physiology: The science that deals with the life processes and functions of organisms, their cells, tissues, and organs. [NIH]

Pigments: Any normal or abnormal coloring matter in plants, animals, or micro-organisms. [NIH]

Pilot study: The initial study examining a new method or treatment. [NIH]

Pituitary Gland: A small, unpaired gland situated in the sella turcica tissue. It is connected to the hypothalamus by a short stalk. [NIH]

Placebos: Any dummy medication or treatment. Although placebos originally were medicinal preparations having no specific pharmacological activity against a targeted condition, the concept has been extended to include treatments or procedures, especially those administered to control groups in clinical trials in order to provide baseline measurements for the experimental protocol. [NIH]

Plant Oils: Oils derived from plants or plant products. [NIH]

Plants: Multicellular, eukaryotic life forms of the kingdom Plantae. They are characterized

by a mainly photosynthetic mode of nutrition; essentially unlimited growth at localized regions of cell divisions (meristems); cellulose within cells providing rigidity; the absence of organs of locomotion; absence of nervous and sensory systems; and an alteration of haploid and diploid generations. [NIH]

Plaque: A clear zone in a bacterial culture grown on an agar plate caused by localized destruction of bacterial cells by a bacteriophage. The concentration of infective virus in a fluid can be estimated by applying the fluid to a culture and counting the number of. [NIH]

Pneumonia: Inflammation of the lungs. [NIH]

Poisoning: A condition or physical state produced by the ingestion, injection or inhalation of, or exposure to a deleterious agent. [NIH]

Polyarthritis: An inflammation of several joints together. [EU]

Polypeptide: A peptide which on hydrolysis yields more than two amino acids; called tripeptides, tetrapeptides, etc. according to the number of amino acids contained. [EU]

Posterior: Situated in back of, or in the back part of, or affecting the back or dorsal surface of the body. In lower animals, it refers to the caudal end of the body. [EU]

Postmenopausal: Refers to the time after menopause. Menopause is the time in a woman's life when menstrual periods stop permanently; also called "change of life." [NIH]

Postnatal: Occurring after birth, with reference to the newborn. [EU]

Postoperative: After surgery. [NIH]

Postoperative Nausea and Vomiting: Emesis and queasiness occurring after anesthesia. [NIH]

Postsynaptic: Nerve potential generated by an inhibitory hyperpolarizing stimulation. [NIH]

Potassium: An element that is in the alkali group of metals. It has an atomic symbol K, atomic number 19, and atomic weight 39.10. It is the chief cation in the intracellular fluid of muscle and other cells. Potassium ion is a strong electrolyte and it plays a significant role in the regulation of fluid volume and maintenance of the water-electrolyte balance. [NIH]

Potentiating: A degree of synergism which causes the exposure of the organism to a harmful substance to worsen a disease already contracted. [NIH]

Practice Guidelines: Directions or principles presenting current or future rules of policy for the health care practitioner to assist him in patient care decisions regarding diagnosis, therapy, or related clinical circumstances. The guidelines may be developed by government agencies at any level, institutions, professional societies, governing boards, or by the convening of expert panels. The guidelines form a basis for the evaluation of all aspects of health care and delivery. [NIH]

Preclinical: Before a disease becomes clinically recognizable. [EU]

Precursor: Something that precedes. In biological processes, a substance from which another, usually more active or mature substance is formed. In clinical medicine, a sign or symptom that heralds another. [EU]

Pregnenolone: Steroid hormone. [NIH]

Premenstrual: Occurring before menstruation. [EU]

Premenstrual Syndrome: A syndrome occurring most often during the last week of the menstrual cycle and ending soon after the onset of menses. Some of the symptoms are emotional instability, insomnia, headache, nausea, vomiting, abdominal distension, and painful breasts. [NIH]

Prevalence: The total number of cases of a given disease in a specified population at a

designated time. It is differentiated from incidence, which refers to the number of new cases in the population at a given time. [NIH]

Primary endpoint: The main result that is measured at the end of a study to see if a given treatment worked (e.g., the number of deaths or the difference in survival between the treatment group and the control group). What the primary endpoint will be is decided before the study begins. [NIH]

Primary Prevention: Prevention of disease or mental disorders in susceptible individuals or populations through promotion of health, including mental health, and specific protection, as in immunization, as distinguished from the prevention of complications or after-effects of existing disease. [NIH]

Progression: Increase in the size of a tumor or spread of cancer in the body. [NIH]

Projection: A defense mechanism, operating unconsciously, whereby that which is emotionally unacceptable in the self is rejected and attributed (projected) to others. [NIH]

Proline: A non-essential amino acid that is synthesized from glutamic acid. It is an essential component of collagen and is important for proper functioning of joints and tendons. [NIH]

Prostaglandins: A group of compounds derived from unsaturated 20-carbon fatty acids, primarily arachidonic acid, via the cyclooxygenase pathway. They are extremely potent mediators of a diverse group of physiological processes. [NIH]

Prostate: A gland in males that surrounds the neck of the bladder and the urethra. It secretes a substance that liquifies coagulated semen. It is situated in the pelvic cavity behind the lower part of the pubic symphysis, above the deep layer of the triangular ligament, and rests upon the rectum. [NIH]

Prostate gland: A gland in the male reproductive system just below the bladder. It surrounds part of the urethra, the canal that empties the bladder, and produces a fluid that forms part of semen. [NIH]

Prostatitis: Inflammation of the prostate. [EU]

Protein S: The vitamin K-dependent cofactor of activated protein C. Together with protein C, it inhibits the action of factors VIIIa and Va. A deficiency in protein S can lead to recurrent venous and arterial thrombosis. [NIH]

Proteins: Polymers of amino acids linked by peptide bonds. The specific sequence of amino acids determines the shape and function of the protein. [NIH]

Proteolytic: 1. pertaining to, characterized by, or promoting proteolysis. 2. an enzyme that promotes proteolysis (= the splitting of proteins by hydrolysis of the peptide bonds with formation of smaller polypeptides). [EU]

Protocol: The detailed plan for a clinical trial that states the trial's rationale, purpose, drug or vaccine dosages, length of study, routes of administration, who may participate, and other aspects of trial design. [NIH]

Proximal: Nearest; closer to any point of reference; opposed to distal. [EU]

Pruritus: An intense itching sensation that produces the urge to rub or scratch the skin to obtain relief. [NIH]

Psychiatry: The medical science that deals with the origin, diagnosis, prevention, and treatment of mental disorders. [NIH]

Psychic: Pertaining to the psyche or to the mind; mental. [EU]

Psychoactive: Those drugs which alter sensation, mood, consciousness or other psychological or behavioral functions. [NIH]

Psychology: The science dealing with the study of mental processes and behavior in man

and animals. [NIH]

Psychoneuroimmunology: The field concerned with the interrelationship between the brain, behavior and the immune system. Neuropsychologic, neuroanatomic and psychosocial studies have demonstrated their role in accentuating or diminishing immune/allergic responses. [NIH]

Psychotherapy: A generic term for the treatment of mental illness or emotional disturbances primarily by verbal or nonverbal communication. [NIH]

Public Health: Branch of medicine concerned with the prevention and control of disease and disability, and the promotion of physical and mental health of the population on the international, national, state, or municipal level. [NIH]

Public Policy: A course or method of action selected, usually by a government, from among alternatives to guide and determine present and future decisions. [NIH]

Publishing: "The business or profession of the commercial production and issuance of literature" (Webster's 3d). It includes the publisher, publication processes, editing and editors. Production may be by conventional printing methods or by electronic publishing. [NIH]

Puerperium: Period from delivery of the placenta until return of the reproductive organs to their normal nonpregnant morphologic state. In humans, the puerperium generally lasts for six to eight weeks. [NIH]

Pulmonary: Relating to the lungs. [NIH]

Pulse: The rhythmical expansion and contraction of an artery produced by waves of pressure caused by the ejection of blood from the left ventricle of the heart as it contracts. [NIH]

Purulent: Consisting of or containing pus; associated with the formation of or caused by pus. [EU]

Quackery: The fraudulent misrepresentation of the diagnosis and treatment of disease. [NIH]

Quality of Health Care: The levels of excellence which characterize the health service or health care provided based on accepted standards of quality. [NIH]

Quality of Life: A generic concept reflecting concern with the modification and enhancement of life attributes, e.g., physical, political, moral and social environment. [NIH]

Race: A population within a species which exhibits general similarities within itself, but is both discontinuous and distinct from other populations of that species, though not sufficiently so as to achieve the status of a taxon. [NIH]

Radiation: Emission or propagation of electromagnetic energy (waves/rays), or the waves/rays themselves; a stream of electromagnetic particles (electrons, neutrons, protons, alpha particles) or a mixture of these. The most common source is the sun. [NIH]

Radiation therapy: The use of high-energy radiation from x-rays, gamma rays, neutrons, and other sources to kill cancer cells and shrink tumors. Radiation may come from a machine outside the body (external-beam radiation therapy), or it may come from radioactive material placed in the body in the area near cancer cells (internal radiation therapy, implant radiation, or brachytherapy). Systemic radiation therapy uses a radioactive substance, such as a radiolabeled monoclonal antibody, that circulates throughout the body. Also called radiotherapy. [NIH]

Radioactive: Giving off radiation. [NIH]

Radiology: A specialty concerned with the use of x-ray and other forms of radiant energy in the diagnosis and treatment of disease. [NIH]

Radiopharmaceutical: Any medicinal product which, when ready for use, contains one or more radionuclides (radioactive isotopes) included for a medicinal purpose. [NIH]

Randomized: Describes an experiment or clinical trial in which animal or human subjects are assigned by chance to separate groups that compare different treatments. [NIH]

Randomized Controlled Trials: Clinical trials that involve at least one test treatment and one control treatment, concurrent enrollment and follow-up of the test- and control-treated groups, and in which the treatments to be administered are selected by a random process, such as the use of a random-numbers table. Treatment allocations using coin flips, odd-even numbers, patient social security numbers, days of the week, medical record numbers, or other such pseudo- or quasi-random processes, are not truly randomized and trials employing any of these techniques for patient assignment are designated simply controlled clinical trials. [NIH]

Reassurance: A procedure in psychotherapy that seeks to give the client confidence in a favorable outcome. It makes use of suggestion, of the prestige of the therapist. [NIH]

Receptor: A molecule inside or on the surface of a cell that binds to a specific substance and causes a specific physiologic effect in the cell. [NIH]

Rectum: The last 8 to 10 inches of the large intestine. [NIH]

Recurrence: The return of a sign, symptom, or disease after a remission. [NIH]

Red Nucleus: A pinkish-yellow portion of the midbrain situated in the rostral mesencephalic tegmentum. It receives a large projection from the contralateral half of the cerebellum via the superior cerebellar peduncle and a projection from the ipsilateral motor cortex. [NIH]

Refer: To send or direct for treatment, aid, information, or decision. [NIH]

Reflex: An involuntary movement or exercise of function in a part, excited in response to a stimulus applied to the periphery and transmitted to the brain or spinal cord. [NIH]

Refraction: A test to determine the best eyeglasses or contact lenses to correct a refractive error (myopia, hyperopia, or astigmatism). [NIH]

Refractory: Not readily yielding to treatment. [EU]

Regimen: A treatment plan that specifies the dosage, the schedule, and the duration of treatment. [NIH]

Relaxation Techniques: The use of muscular relaxation techniques in treatment. [NIH]

Remission: A decrease in or disappearance of signs and symptoms of cancer. In partial remission, some, but not all, signs and symptoms of cancer have disappeared. In complete remission, all signs and symptoms of cancer have disappeared, although there still may be cancer in the body. [NIH]

Reproductive system: In women, this system includes the ovaries, the fallopian tubes, the uterus (womb), the cervix, and the vagina (birth canal). The reproductive system in men includes the prostate, the testes, and the penis. [NIH]

Respiration: The act of breathing with the lungs, consisting of inspiration, or the taking into the lungs of the ambient air, and of expiration, or the expelling of the modified air which contains more carbon dioxide than the air taken in (Blakiston's Gould Medical Dictionary, 4th ed.). This does not include tissue respiration (= oxygen consumption) or cell respiration (= cell respiration). [NIH]

Respiratory Burst: A large increase in oxygen uptake by neutrophils and most types of tissue macrophages through activation of an NADPH-cytochrome b-dependent oxidase that reduces oxygen to a superoxide. Individuals with an inherited defect in which the oxidase

that reduces oxygen to superoxide is decreased or absent (granulomatous disease, chronic) often die as a result of recurrent bacterial infections. [NIH]

Restoration: Broad term applied to any inlay, crown, bridge or complete denture which restores or replaces loss of teeth or oral tissues. [NIH]

Retina: The ten-layered nervous tissue membrane of the eye. It is continuous with the optic nerve and receives images of external objects and transmits visual impulses to the brain. Its outer surface is in contact with the choroid and the inner surface with the vitreous body. The outer-most layer is pigmented, whereas the inner nine layers are transparent. [NIH]

Retinal: 1. pertaining to the retina. 2. the aldehyde of retinol, derived by the oxidative enzymatic splitting of absorbed dietary carotene, and having vitamin A activity. In the retina, retinal combines with opsins to form visual pigments. One isomer, 11-cis retinal combines with opsin in the rods (scotopsin) to form rhodopsin, or visual purple. Another, all-trans retinal (trans-r.); visual yellow; xanthopsin) results from the bleaching of rhodopsin by light, in which the 11-cis form is converted to the all-trans form. Retinal also combines with opsins in the cones (photopsins) to form the three pigments responsible for colour vision. Called also retinal, and retinene1. [EU]

Retinal Vein: Central retinal vein and its tributaries. It runs a short course within the optic nerve and then leaves and empties into the superior ophthalmic vein or cavernous sinus. [NIH]

Retinol: Vitamin A. It is essential for proper vision and healthy skin and mucous membranes. Retinol is being studied for cancer prevention; it belongs to the family of drugs called retinoids. [NIH]

Retrospective: Looking back at events that have already taken place. [NIH]

Retrospective study: A study that looks backward in time, usually using medical records and interviews with patients who already have or had a disease. [NIH]

Rheumatism: A group of disorders marked by inflammation or pain in the connective tissue structures of the body. These structures include bone, cartilage, and fat. [NIH]

Rheumatoid: Resembling rheumatism. [EU]

Rheumatoid arthritis: A form of arthritis, the cause of which is unknown, although infection, hypersensitivity, hormone imbalance and psychologic stress have been suggested as possible causes. [NIH]

Rheumatology: A subspecialty of internal medicine concerned with the study of inflammatory or degenerative processes and metabolic derangement of connective tissue structures which pertain to a variety of musculoskeletal disorders, such as arthritis. [NIH]

Rhinitis: Inflammation of the mucous membrane of the nose. [NIH]

Rhodopsin: A photoreceptor protein found in retinal rods. It is a complex formed by the binding of retinal, the oxidized form of retinol, to the protein opsin and undergoes a series of complex reactions in response to visible light resulting in the transmission of nerve impulses to the brain. [NIH]

Rigidity: Stiffness or inflexibility, chiefly that which is abnormal or morbid; rigor. [EU]

Risk factor: A habit, trait, condition, or genetic alteration that increases a person's chance of developing a disease. [NIH]

Rod: A reception for vision, located in the retina. [NIH]

Saliva: The clear, viscous fluid secreted by the salivary glands and mucous glands of the mouth. It contains mucins, water, organic salts, and ptylin. [NIH]

Salivary: The duct that convey saliva to the mouth. [NIH]

Salivary glands: Glands in the mouth that produce saliva. [NIH]

Sarcoma: A connective tissue neoplasm formed by proliferation of mesodermal cells; it is usually highly malignant. [NIH]

Schizoid: Having qualities resembling those found in greater degree in schizophrenics; a person of schizoid personality. [NIH]

Schizophrenia: A severe emotional disorder of psychotic depth characteristically marked by a retreat from reality with delusion formation, hallucinations, emotional disharmony, and regressive behavior. [NIH]

Schizotypal Personality Disorder: A personality disorder in which there are oddities of thought (magical thinking, paranoid ideation, suspiciousness), perception (illusions, depersonalization), speech (digressive, vague, overelaborate), and behavior (inappropriate affect in social interactions, frequently social isolation) that are not severe enough to characterize schizophrenia. [NIH]

Screening: Checking for disease when there are no symptoms. [NIH]

Second Messenger Systems: Systems in which an intracellular signal is generated in response to an intercellular primary messenger such as a hormone or neurotransmitter. They are intermediate signals in cellular processes such as metabolism, secretion, contraction, phototransduction, and cell growth. Examples of second messenger systems are the adenyl cyclase-cyclic AMP system, the phosphatidylinositol diphosphate-inositol triphosphate system, and the cyclic GMP system. [NIH]

Secretion: 1. the process of elaborating a specific product as a result of the activity of a gland; this activity may range from separating a specific substance of the blood to the elaboration of a new chemical substance. 2. any substance produced by secretion. [EU]

Sedative: 1. allaying activity and excitement. 2. an agent that allays excitement. [EU]

Semen: The thick, yellowish-white, viscid fluid secretion of male reproductive organs discharged upon ejaculation. In addition to reproductive organ secretions, it contains spermatozoa and their nutrient plasma. [NIH]

Semicircular canal: Three long canals of the bony labyrinth of the ear, forming loops and opening into the vestibule by five openings. [NIH]

Sensibility: The ability to receive, feel and appreciate sensations and impressions; the quality of being sensitive; the extend to which a method gives results that are free from false negatives. [NIH]

Sensor: A device designed to respond to physical stimuli such as temperature, light, magnetism or movement and transmit resulting impulses for interpretation, recording, movement, or operating control. [NIH]

Sepsis: The presence of bacteria in the bloodstream. [NIH]

Septal: An abscess occurring at the root of the tooth on the proximal surface. [NIH]

Septal Nuclei: Neural nuclei situated in the septal region. They have afferent and cholinergic efferent connections with a variety of forebrain and brainstem areas including the hippocampus, the lateral hypothalamus, the tegmentum, and the amygdala. Included are the dorsal, lateral, medial, and triangular septal nuclei, septofimbrial nucleus, nucleus of diagonal band, nucleus of anterior commissure, and the nucleus of stria terminalis. [NIH]

Serotonin: A biochemical messenger and regulator, synthesized from the essential amino acid L-tryptophan. In humans it is found primarily in the central nervous system, gastrointestinal tract, and blood platelets. Serotonin mediates several important physiological functions including neurotransmission, gastrointestinal motility, hemostasis,

and cardiovascular integrity. Multiple receptor families (receptors, serotonin) explain the broad physiological actions and distribution of this biochemical mediator. [NIH]

Serum: The clear liquid part of the blood that remains after blood cells and clotting proteins have been removed. [NIH]

Sex Characteristics: Those characteristics that distinguish one sex from the other. The primary sex characteristics are the ovaries and testes and their related hormones. Secondary sex characteristics are those which are masculine or feminine but not directly related to reproduction. [NIH]

Shoulder Pain: Unilateral or bilateral pain of the shoulder. It is often caused by physical activities such as work or sports participation, but may also be pathologic in origin. [NIH]

Sicca: Failure of lacrimal secretion, keratoconjunctivitis sicca, failure of secretion of the salivary glands and mucous glands of the upper respiratory tract and polyarthritis. [NIH]

Side effect: A consequence other than the one(s) for which an agent or measure is used, as the adverse effects produced by a drug, especially on a tissue or organ system other than the one sought to be benefited by its administration. [EU]

Signs and Symptoms: Clinical manifestations that can be either objective when observed by a physician, or subjective when perceived by the patient. [NIH]

Sinusitis: An inflammatory process of the mucous membranes of the paranasal sinuses that occurs in three stages: acute, subacute, and chronic. Sinusitis results from any condition causing ostial obstruction or from pathophysiologic changes in the mucociliary transport mechanism. [NIH]

Skeletal: Having to do with the skeleton (boney part of the body). [NIH]

Skull: The skeleton of the head including the bones of the face and the bones enclosing the brain. [NIH]

Small intestine: The part of the digestive tract that is located between the stomach and the large intestine. [NIH]

Smoking Cessation: Discontinuation of the habit of smoking, the inhaling and exhaling of tobacco smoke. [NIH]

Smooth muscle: Muscle that performs automatic tasks, such as constricting blood vessels. [NIH]

Social Environment: The aggregate of social and cultural institutions, forms, patterns, and processes that influence the life of an individual or community. [NIH]

Social Security: Government sponsored social insurance programs. [NIH]

Sodium: An element that is a member of the alkali group of metals. It has the atomic symbol Na, atomic number 11, and atomic weight 23. With a valence of 1, it has a strong affinity for oxygen and other nonmetallic elements. Sodium provides the chief cation of the extracellular body fluids. Its salts are the most widely used in medicine. (From Dorland, 27th ed) Physiologically the sodium ion plays a major role in blood pressure regulation, maintenance of fluid volume, and electrolyte balance. [NIH]

Soft tissue: Refers to muscle, fat, fibrous tissue, blood vessels, or other supporting tissue of the body. [NIH]

Soma: The body as distinct from the mind; all the body tissue except the germ cells; all the axial body. [NIH]

Somatic: 1. pertaining to or characteristic of the soma or body. 2. pertaining to the body wall in contrast to the viscera. [EU]

Sound wave: An alteration of properties of an elastic medium, such as pressure, particle

displacement, or density, that propagates through the medium, or a superposition of such alterations. [NIH]

Spasm: An involuntary contraction of a muscle or group of muscles. Spasms may involve skeletal muscle or smooth muscle. [NIH]

Spastic: 1. of the nature of or characterized by spasms. 2. hypertonic, so that the muscles are stiff and the movements awkward. 3. a person exhibiting spasticity, such as occurs in spastic paralysis or in cerebral palsy. [EU]

Spasticity: A state of hypertonicity, or increase over the normal tone of a muscle, with heightened deep tendon reflexes. [EU]

Spatial disorientation: Loss of orientation in space where person does not know which way is up. [NIH]

Specialist: In medicine, one who concentrates on 1 special branch of medical science. [NIH]

Species: A taxonomic category subordinate to a genus (or subgenus) and superior to a subspecies or variety, composed of individuals possessing common characters distinguishing them from other categories of individuals of the same taxonomic level. In taxonomic nomenclature, species are designated by the genus name followed by a Latin or Latinized adjective or noun. [EU]

Specificity: Degree of selectivity shown by an antibody with respect to the number and types of antigens with which the antibody combines, as well as with respect to the rates and the extents of these reactions. [NIH]

Spectrum: A charted band of wavelengths of electromagnetic vibrations obtained by refraction and diffraction. By extension, a measurable range of activity, such as the range of bacteria affected by an antibiotic (antibacterial s.) or the complete range of manifestations of a disease. [EU]

Spinal cord: The main trunk or bundle of nerves running down the spine through holes in the spinal bone (the vertebrae) from the brain to the level of the lower back. [NIH]

Spinal Cord Injuries: Penetrating and non-penetrating injuries to the spinal cord resulting from traumatic external forces (e.g., wounds, gunshot; whiplash injuries; etc.). [NIH]

Spinous: Like a spine or thorn in shape; having spines. [NIH]

Sprains and Strains: A collective term for muscle and ligament injuries without dislocation or fracture. A sprain is a joint injury in which some of the fibers of a supporting ligament are ruptured but the continuity of the ligament remains intact. A strain is an overstretching or overexertion of some part of the musculature. [NIH]

Steel: A tough, malleable, iron-based alloy containing up to, but no more than, two percent carbon and often other metals. It is used in medicine and dentistry in implants and instrumentation. [NIH]

Stem cell transplantation: A method of replacing immature blood-forming cells that were destroyed by cancer treatment. The stem cells are given to the person after treatment to help the bone marrow recover and continue producing healthy blood cells. [NIH]

Stem Cells: Relatively undifferentiated cells of the same lineage (family type) that retain the ability to divide and cycle throughout postnatal life to provide cells that can become specialized and take the place of those that die or are lost. [NIH]

Sterility: 1. the inability to produce offspring, i.e., the inability to conceive (female s.) or to induce conception (male s.). 2. the state of being aseptic, or free from microorganisms. [EU]

Steroid: A group name for lipids that contain a hydrogenated cyclopentanoperhydrophenanthrene ring system. Some of the substances included in this

group are progesterone, adrenocortical hormones, the gonadal hormones, cardiac aglycones, bile acids, sterols (such as cholesterol), toad poisons, saponins, and some of the carcinogenic hydrocarbons. [EU]

Stifle: In horses, cattle, and other quadrupeds, the joint between the femur and the tibia, corresponding to the human knee. [NIH]

Stimulants: Any drug or agent which causes stimulation. [NIH]

Stimulus: That which can elicit or evoke action (response) in a muscle, nerve, gland or other excitable issue, or cause an augmenting action upon any function or metabolic process. [NIH]

Stomach: An organ of digestion situated in the left upper quadrant of the abdomen between the termination of the esophagus and the beginning of the duodenum. [NIH]

Stool: The waste matter discharged in a bowel movement; feces. [NIH]

Stress: Forcibly exerted influence; pressure. Any condition or situation that causes strain or tension. Stress may be either physical or psychologic, or both. [NIH]

Stroke: Sudden loss of function of part of the brain because of loss of blood flow. Stroke may be caused by a clot (thrombosis) or rupture (hemorrhage) of a blood vessel to the brain. [NIH]

Stromal: Large, veil-like cell in the bone marrow. [NIH]

Subacute: Somewhat acute; between acute and chronic. [EU]

Subarachnoid: Situated or occurring between the arachnoid and the pia mater. [EU]

Subclinical: Without clinical manifestations; said of the early stage(s) of an infection or other disease or abnormality before symptoms and signs become apparent or detectable by clinical examination or laboratory tests, or of a very mild form of an infection or other disease or abnormality. [EU]

Subcutaneous: Beneath the skin. [NIH]

Subspecies: A category intermediate in rank between species and variety, based on a smaller number of correlated characters than are used to differentiate species and generally conditioned by geographical and/or ecological occurrence. [NIH]

Suction: The removal of secretions, gas or fluid from hollow or tubular organs or cavities by means of a tube and a device that acts on negative pressure. [NIH]

Sumatriptan: A serotonin agonist that acts selectively at 5HT₁ receptors. It is used in the treatment of migraines. [NIH]

Superoxide: Derivative of molecular oxygen that can damage cells. [NIH]

Supplementation: Adding nutrients to the diet. [NIH]

Suppression: A conscious exclusion of disapproved desire contrary with repression, in which the process of exclusion is not conscious. [NIH]

Symphysis: A secondary cartilaginous joint. [NIH]

Symptomatic: Having to do with symptoms, which are signs of a condition or disease. [NIH]

Symptomatic treatment: Therapy that eases symptoms without addressing the cause of disease. [NIH]

Synapses: Specialized junctions at which a neuron communicates with a target cell. At classical synapses, a neuron's presynaptic terminal releases a chemical transmitter stored in synaptic vesicles which diffuses across a narrow synaptic cleft and activates receptors on the postsynaptic membrane of the target cell. The target may be a dendrite, cell body, or axon of another neuron, or a specialized region of a muscle or secretory cell. Neurons may also

communicate through direct electrical connections which are sometimes called electrical synapses; these are not included here but rather in gap junctions. [NIH]

Synaptic: Pertaining to or affecting a synapse (= site of functional apposition between neurons, at which an impulse is transmitted from one neuron to another by electrical or chemical means); pertaining to synapsis (= pairing off in point-for-point association of homologous chromosomes from the male and female pronuclei during the early prophase of meiosis). [EU]

Synergistic: Acting together; enhancing the effect of another force or agent. [EU]

Systemic: Affecting the entire body. [NIH]

Systolic: Indicating the maximum arterial pressure during contraction of the left ventricle of the heart. [EU]

Telefacsimile: A telecommunication system combining the transmission of a document scanned at a transmitter, its reconstruction at a receiving station, and its duplication there by a copier. [NIH]

Telomere: A terminal section of a chromosome which has a specialized structure and which is involved in chromosomal replication and stability. Its length is believed to be a few hundred base pairs. [NIH]

Tendon: A discrete band of connective tissue mainly composed of parallel bundles of collagenous fibers by which muscles are attached, or two muscles bellies joined. [NIH]

Tennis Elbow: A condition characterized by pain in or near the lateral humeral epicondyle or in the forearm extensor muscle mass as a result of unusual strain. It occurs in tennis players as well as housewives, artisans, and violinists. [NIH]

Testimonials: Information provided by individuals who claim to have been helped or cured by a particular product. The information provided lacks the necessary elements to be evaluated in a rigorous and scientific manner and is not used in the scientific literature. [NIH]

Therapeutics: The branch of medicine which is concerned with the treatment of diseases, palliative or curative. [NIH]

Thermal: Pertaining to or characterized by heat. [EU]

Thermography: Measurement of the regional temperature of the body or an organ by infrared sensing devices, based on self-emanating infrared radiation. [NIH]

Thiamine: 3-((4-Amino-2-methyl-5-pyrimidinyl)methyl)-5-(2-hydroxyethyl)-4-methylthiazolium chloride. [NIH]

Thoracic: Having to do with the chest. [NIH]

Threshold: For a specified sensory modality (e. g. light, sound, vibration), the lowest level (absolute threshold) or smallest difference (difference threshold, difference limen) or intensity of the stimulus discernible in prescribed conditions of stimulation. [NIH]

Thrombosis: The formation or presence of a blood clot inside a blood vessel. [NIH]

Thromboxanes: Physiologically active compounds found in many organs of the body. They are formed in vivo from the prostaglandin endoperoxides and cause platelet aggregation, contraction of arteries, and other biological effects. Thromboxanes are important mediators of the actions of polyunsaturated fatty acids transformed by cyclooxygenase. [NIH]

Thrombus: An aggregation of blood factors, primarily platelets and fibrin with entrapment of cellular elements, frequently causing vascular obstruction at the point of its formation. Some authorities thus differentiate thrombus formation from simple coagulation or clot formation. [EU]

Tibia: The second longest bone of the skeleton. It is located on the medial side of the lower

leg, articulating with the fibula laterally, the talus distally, and the femur proximally. [NIH]

Tin: A trace element that is required in bone formation. It has the atomic symbol Sn, atomic number 50, and atomic weight 118.71. [NIH]

Tissue: A group or layer of cells that are alike in type and work together to perform a specific function. [NIH]

Tone: 1. the normal degree of vigour and tension; in muscle, the resistance to passive elongation or stretch; tonus. 2. a particular quality of sound or of voice. 3. to make permanent, or to change, the colour of silver stain by chemical treatment, usually with a heavy metal. [EU]

Tooth Preparation: Procedures carried out with regard to the teeth or tooth structures preparatory to specified dental therapeutic and surgical measures. [NIH]

Toxic: Having to do with poison or something harmful to the body. Toxic substances usually cause unwanted side effects. [NIH]

Toxicity: The quality of being poisonous, especially the degree of virulence of a toxic microbe or of a poison. [EU]

Toxicology: The science concerned with the detection, chemical composition, and pharmacologic action of toxic substances or poisons and the treatment and prevention of toxic manifestations. [NIH]

Toxin: A poison; frequently used to refer specifically to a protein produced by some higher plants, certain animals, and pathogenic bacteria, which is highly toxic for other living organisms. Such substances are differentiated from the simple chemical poisons and the vegetable alkaloids by their high molecular weight and antigenicity. [EU]

Transcutaneous: Transdermal. [EU]

Transfection: The uptake of naked or purified DNA into cells, usually eukaryotic. It is analogous to bacterial transformation. [NIH]

Transmitter: A chemical substance which effects the passage of nerve impulses from one cell to the other at the synapse. [NIH]

Tricyclic: Containing three fused rings or closed chains in the molecular structure. [EU]

Tryptophan: An essential amino acid that is necessary for normal growth in infants and for nitrogen balance in adults. It is a precursor serotonin and niacin. [NIH]

Ulcer: A lesion on the surface of the skin or a mucous surface, produced by the sloughing of inflammatory necrotic tissue. [NIH]

Ulceration: 1. the formation or development of an ulcer. 2. an ulcer. [EU]

Ulcerative colitis: Chronic inflammation of the colon that produces ulcers in its lining. This condition is marked by abdominal pain, cramps, and loose discharges of pus, blood, and mucus from the bowel. [NIH]

Ureters: Tubes that carry urine from the kidneys to the bladder. [NIH]

Urethra: The tube through which urine leaves the body. It empties urine from the bladder. [NIH]

Urinary: Having to do with urine or the organs of the body that produce and get rid of urine. [NIH]

Urinary tract: The organs of the body that produce and discharge urine. These include the kidneys, ureters, bladder, and urethra. [NIH]

Urine: Fluid containing water and waste products. Urine is made by the kidneys, stored in the bladder, and leaves the body through the urethra. [NIH]

Uterus: The small, hollow, pear-shaped organ in a woman's pelvis. This is the organ in which a fetus develops. Also called the womb. [NIH]

Vaccine: A substance or group of substances meant to cause the immune system to respond to a tumor or to microorganisms, such as bacteria or viruses. [NIH]

Vascular: Pertaining to blood vessels or indicative of a copious blood supply. [EU]

Vein: Vessel-carrying blood from various parts of the body to the heart. [NIH]

Venous: Of or pertaining to the veins. [EU]

Venter: Belly. [NIH]

Ventral: 1. pertaining to the belly or to any venter. 2. denoting a position more toward the belly surface than some other object of reference; same as anterior in human anatomy. [EU]

Ventral Tegmental Area: A region in the mesencephalon which is dorsomedial to the substantia nigra and ventral to the red nucleus. The mesocortical and mesolimbic dopaminergic systems originate here, including an important projection to the nucleus accumbens. Overactivity of the cells in this area has been suspected to contribute to the positive symptoms of schizophrenia. [NIH]

Ventricle: One of the two pumping chambers of the heart. The right ventricle receives oxygen-poor blood from the right atrium and pumps it to the lungs through the pulmonary artery. The left ventricle receives oxygen-rich blood from the left atrium and pumps it to the body through the aorta. [NIH]

Vertebrae: A bony unit of the segmented spinal column. [NIH]

Vertebral: Of or pertaining to a vertebra. [EU]

Vestibular: Pertaining to or toward a vestibule. In dental anatomy, used to refer to the tooth surface directed toward the vestibule of the mouth. [EU]

Vestibule: A small, oval, bony chamber of the labyrinth. The vestibule contains the utricle and saccule, organs which are part of the balancing apparatus of the ear. [NIH]

Veterinary Medicine: The medical science concerned with the prevention, diagnosis, and treatment of diseases in animals. [NIH]

Viral: Pertaining to, caused by, or of the nature of virus. [EU]

Viral Load: The quantity of measurable virus in the blood. Change in viral load, measured in plasma, is used as a surrogate marker in HIV disease progression. [NIH]

Virulence: The degree of pathogenicity within a group or species of microorganisms or viruses as indicated by case fatality rates and/or the ability of the organism to invade the tissues of the host. [NIH]

Virus: Submicroscopic organism that causes infectious disease. In cancer therapy, some viruses may be made into vaccines that help the body build an immune response to, and kill, tumor cells. [NIH]

Viscera: Any of the large interior organs in any one of the three great cavities of the body, especially in the abdomen. [NIH]

Visceral: , from viscus a viscus) pertaining to a viscus. [EU]

Vitro: Descriptive of an event or enzyme reaction under experimental investigation occurring outside a living organism. Parts of an organism or microorganism are used together with artificial substrates and/or conditions. [NIH]

Vivo: Outside of or removed from the body of a living organism. [NIH]

Volition: Voluntary activity without external compulsion. [NIH]

White blood cell: A type of cell in the immune system that helps the body fight infection and disease. White blood cells include lymphocytes, granulocytes, macrophages, and others. [NIH]

Withdrawal: 1. a pathological retreat from interpersonal contact and social involvement, as may occur in schizophrenia, depression, or schizoid avoidant and schizotypal personality disorders. 2. (DSM III-R) a substance-specific organic brain syndrome that follows the cessation of use or reduction in intake of a psychoactive substance that had been regularly used to induce a state of intoxication. [EU]

Wounds, Gunshot: Disruption of structural continuity of the body as a result of the discharge of firearms. [NIH]

Xenograft: The cells of one species transplanted to another species. [NIH]

X-ray: High-energy radiation used in low doses to diagnose diseases and in high doses to treat cancer. [NIH]

Zoster: A virus infection of the Gasserian ganglion and its nerve branches, characterized by discrete areas of vesiculation of the epithelium of the forehead, the nose, the eyelids, and the cornea together with subepithelial infiltration. [NIH]

INDEX

3

3-dimensional, 88, 195

A

Abdomen, 195, 201, 215, 219, 220, 228, 239, 243

Abdominal, 65, 176, 195, 209, 219, 227, 230, 242

Abdominal Pain, 176, 195, 219, 242

Abscess, 35, 195, 236

Acceptor, 195, 227

Acculturation, 22, 124, 195

Acetylcholine, 195, 203, 204

Achievement, 195, 209

Acquired Immunodeficiency Syndrome, 114, 176, 195

Acupuncture Analgesia, 79, 81, 195

Acupuncture Points, 30, 31, 34, 58, 119, 196

Acupuncture Therapy, 79, 80, 81, 85, 92, 117, 196

Adaptation, 136, 196

Adjunctive therapy, 196, 199, 224

Adjustment, 196

Adolescence, 14, 196, 228

Adrenal Cortex, 196, 207

Adrenaline, 106, 196

Adrenergic, 196, 197, 211

Adverse effect, 11, 56, 196, 237

Affinity, 196, 237

Agonist, 196, 211, 224, 239

Alimentary, 197

Alpha Particles, 197, 232

Alpha-1, 197

Altruism, 141, 197

Amino acid, 197, 198, 216, 225, 230, 231, 236, 242

Amitriptyline, 113, 118, 197

Amoxicillin, 119, 197

Ampicillin, 197

Anaesthesia, 25, 36, 197

Anal, 197, 212, 213

Analgesic, 11, 81, 117, 197, 211, 222, 223, 226

Analog, 198

Anaphylatoxins, 198, 205

Anaplasia, 198

Anatomical, 35, 198, 200, 203, 218, 223

Androgens, 196, 198, 207

Anesthesia, 34, 79, 176, 198, 210, 230

Animal model, 154, 198

Antiallergic, 198, 207

Antibacterial, 198, 238

Antibiotic, 119, 197, 198, 201, 238

Antibodies, 198, 221

Antibody, 196, 198, 199, 205, 208, 218, 233, 238

Anticholinergic, 197, 198

Antidepressant, 109, 118, 123, 197, 198

Antigen, 196, 198, 199, 205, 217, 218

Antigen-Antibody Complex, 199, 205

Antihypertensive, 104, 199

Anti-inflammatory, 199, 207, 214

Anti-Inflammatory Agents, 199, 207

Antineoplastic, 199, 207

Antioxidant, 121, 199, 200

Anxiety, 10, 27, 66, 107, 199

Aqueous, 199, 200, 211

Arachidonic Acid, 114, 199, 220, 231

Argyria, 25, 33, 199

Art Therapy, 111, 170, 199

Arterial, 31, 199, 214, 217, 231, 240

Arteries, 30, 199, 200, 201, 207, 222, 224, 241

Arterioles, 199, 201, 224

Artery, 23, 68, 199, 201, 207, 232, 243

Arthropathy, 28, 199

Articular, 199, 227

Ascorbic Acid, 4, 199, 217

Atherogenic, 121, 200

Atrium, 200, 243

Auricular, 36, 56, 81, 82, 200

Authorship, 19, 200

Axotomy, 33, 200

B

Back Pain, 25, 114, 121, 122, 200

Bacteria, 138, 198, 199, 200, 212, 214, 223, 236, 238, 242

Bacterial Infections, 200, 203, 214, 234

Bacterial Physiology, 196, 200

Base, 5, 63, 200, 209, 220, 240

Benign, 117, 118, 200, 215, 225

Bilateral, 200, 237

Bile, 200, 213, 220, 239

Biochemical, 200, 227, 236

Bioenergy, 88, 200

Biosynthesis, 199, 200

Biotechnology, 22, 24, 139, 154, 163, 200

Bladder, 25, 201, 206, 218, 231, 242

Bloating, 201, 219

Blood Flow Velocity, 31, 201

Blood pressure, 31, 36, 104, 199, 201, 202, 214, 217, 223, 226, 237

Blood vessel, 201, 202, 203, 237, 239, 241, 242

Body Fluids, 201, 210, 237

- Bone Marrow, 67, 201, 217, 221, 239
 Bowel, 71, 120, 142, 197, 201, 209, 218, 219, 239, 242
 Bowel Movement, 201, 209, 239
 Branch, 16, 146, 191, 201, 228, 232, 238, 241
 Breakdown, 201, 209
 Broad-spectrum, 197, 201
 Bronchi, 201
 Bronchial, 25, 201
- C**
- Calcium, 201, 205
 Carbohydrate, 201, 207, 214
 Carbon Dioxide, 202, 213, 234
 Carcinogenic, 202, 219, 239
 Cardiac, 27, 202, 210, 224, 239
 Cardiovascular, 104, 105, 121, 202, 220, 236
 Cardiovascular disease, 121, 202
 Carnitine, 4, 202
 Carotene, 4, 202, 234
 Carpal Tunnel Syndrome, 13, 67, 113, 119, 202
 Case report, 33, 34, 164, 202, 204
 Case series, 34, 202, 204
 Causal, 202, 211, 219
 Cavernous Sinus, 202, 234
 Cecum, 202, 220
 Cell Division, 200, 202, 229
 Cell Transplantation, 106, 202
 Cellulose, 203, 229
 Central Nervous System, 119, 176, 195, 203, 211, 213, 214, 215, 220, 223, 227, 236
 Central Nervous System Infections, 203, 215
 Cerebral, 31, 32, 61, 122, 203, 212, 238
 Cerebral Cortex, 203, 212
 Cerebral Palsy, 32, 61, 122, 203, 238
 Cerebrovascular, 202, 203
 Cerebrum, 203
 Cervical, 30, 203, 221, 224
 Chemotactic Factors, 203, 205
 Chemotherapy, 13, 57, 103, 106, 110, 176, 203
 Chin, 26, 27, 28, 30, 31, 36, 38, 203, 222
 Chiropractic, 4, 7, 9, 18, 19, 20, 31, 52, 83, 100, 108, 111, 114, 122, 136, 143, 203
 Choline, 4, 203
 Cholinergic, 197, 204, 223, 236
 Chondroitin sulfate, 49, 204
 Chromosome, 204, 215, 240
 Chronic Disease, 56, 204
 Chronic Fatigue Syndrome, 67, 136, 204
 Chronic prostatitis, 25, 57, 204
 CIS, 204, 234
 Citrus, 199, 204
 Clinical Medicine, 204, 230
 Clinical study, 26, 184, 204, 206
 Cloning, 201, 204
 Coagulation, 201, 204, 215, 241
 Cochlea, 204, 219
 Coenzyme, 4, 200, 204
 Cofactor, 205, 231
 Cohort Studies, 11, 205, 212
 Colitis, 78, 142, 205, 220
 Collagen, 117, 197, 205, 231
 Colon, 76, 107, 142, 156, 205, 218, 220, 242
 Complement, 3, 10, 30, 43, 44, 45, 46, 47, 198, 205
 Complementary and alternative medicine, 4, 5, 6, 7, 8, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 30, 31, 40, 41, 42, 43, 44, 45, 46, 47, 51, 52, 53, 54, 57, 58, 59, 60, 61, 62, 63, 64, 97, 111, 114, 121, 124, 146, 149, 155, 156, 164, 165, 173, 174, 175, 176, 177, 179, 182, 205
 Compliance, 123, 206
 Computational Biology, 163, 206
 Conduction, 176, 206
 Cones, 206, 234
 Conjunctiva, 206, 220
 Conjunctivitis, 36, 68, 206
 Connective Tissue, 34, 82, 106, 117, 199, 201, 205, 206, 212, 213, 214, 235, 240
 Connective Tissue Cells, 206
 Consciousness, 197, 206, 208, 231
 Constipation, 68, 156, 206, 219
 Consumption, 206, 209, 234
 Contraindications, ii, 56, 206
 Control group, 107, 110, 116, 206, 229, 230
 Controlled clinical trial, 13, 123, 206, 233
 Controlled study, 36, 206
 Conventional therapy, 206, 207
 Conventional treatment, 15, 207
 Coordination, 17, 207
 Corneum, 207, 212
 Coronary, 68, 202, 207, 222, 224
 Coronary Arteriosclerosis, 207, 224
 Coronary heart disease, 202, 207
 Coronary Thrombosis, 207, 222, 224
 Corrosion, 207
 Corticosteroid, 61, 207
 Cortisol, 108, 120, 207
 Cranial, 207, 212, 215, 227, 228, 229
 Cranial Nerves, 207
 Craniocerebral Trauma, 28, 207, 215
 Credentialing, 8, 57, 115, 208
 Cross-Sectional Studies, 208, 212
 Curative, 208, 241
 Cutaneous, 31, 32, 208
 Cytochrome, 208, 234
 Cytochrome b, 208, 234
 Cytokines, 114, 208
- D**
- Decision Making, 5, 43, 208

- Degenerative, 208, 216, 227, 235
 Dehydroepiandrosterone, 4, 208
 Dementia, 4, 112, 195, 208
 Demyelinating Diseases, 111, 208
 Density, 209, 223, 238
 Dental Care, 137, 209
 Dentists, 12, 209
 Dermatology, 25, 43, 60, 209
 Detoxification, 36, 209
 Developed Countries, 41, 209
 Diabetes Mellitus, 55, 68, 209, 214
 Diagnostic procedure, 127, 154, 209
 Diaphragm, 209, 216
 Diarrhea, 36, 69, 105, 156, 209, 220
 Diastolic, 209, 217
 Diathesis, 209, 215
 Diffusion, 209, 218
 Digestion, 31, 156, 197, 201, 209, 219, 220, 239
 Digestive system, 125, 209, 213, 223
 Digestive tract, 209, 237
 Diploid, 209, 229
 Direct, iii, 19, 20, 111, 115, 204, 209, 233, 240
 Disease Progression, 209, 243
 Disparity, 121, 210
 Distal, 210, 231
 Dizziness, 210
 Double-blind, 104, 123, 210
 Drug Interactions, 7, 14, 210
 Duct, 210, 235
- E**
- Ectopic, 26, 210
 Effector, 195, 205, 210, 225
 Effector cell, 210, 225
 Elastic, 117, 210, 238
 Elastin, 205, 210
 Elective, 21, 210
 Electroacupuncture, 16, 23, 32, 61, 85, 103, 104, 116, 210
 Electrode, 210
 Electrolyte, 207, 210, 223, 230, 237
 Electrons, 199, 200, 210, 219, 227, 232
 Emaciation, 195, 210
 Empirical, 109, 210
 Emulsion, 211, 213
 Endocrinology, 40, 211, 215
 Endometrial, 211
 Endometriosis, 69, 122, 211
 Endometrium, 26, 211, 222
 Endorphin, 104, 211
 Endotoxins, 205, 211
 Energetic, 93, 94, 211
 Enuresis, 38, 211
 Environmental Health, 162, 164, 211
 Enzyme, 55, 204, 210, 211, 231, 243
- Ephedrine, 164, 211
 Epidemiologic Studies, 20, 211
 Epidemiological, 8, 121, 212
 Epidermis, 207, 212, 216
 Esophagus, 209, 212, 239
 Evacuation, 206, 212
 Evoke, 112, 212, 239
 Extensor, 212, 240
 Extracellular, 206, 212, 237
 Extracellular Matrix, 206, 212
 Extraction, 28, 118, 212
 Extremity, 113, 212, 221
- F**
- Facial, 28, 212
 Facial Nerve, 212
 Facial Paralysis, 28, 212
 Family Planning, 163, 212
 Family Practice, 6, 11, 47, 52, 64, 212
 Fat, 199, 201, 202, 207, 212, 214, 220, 235, 237
 Fatigue, 110, 116, 138, 204, 212, 216
 Feces, 206, 212, 239
 Femur, 212, 239, 241
 Fibrosis, 55, 68, 212
 Fixation, 213
 Foramen, 203, 212, 213
 Forearm, 201, 213, 221, 240
 Fovea, 213
 Free Radicals, 199, 213
 Friction, 10, 156, 213
 Frostbite, 70, 136, 213
- G**
- Gait, 17, 213
 Gallbladder, 70, 195, 209, 213
 Ganglia, 195, 213, 225, 226, 229
 Gastric, 31, 197, 202, 213
 Gastric Acid, 197, 213
 Gastrin, 213, 216
 Gastroenterologist, 142, 213
 Gastrointestinal, 26, 105, 107, 120, 142, 156, 213, 220, 236
 Gastrointestinal tract, 120, 142, 213, 220, 236
 Gene, 139, 201, 214, 215
 Generator, 214
 Genital, 214, 215
 Ginkgo biloba, 4, 109, 112, 214
 Ginseng, 4, 8, 214
 Gland, 196, 214, 227, 228, 229, 231, 236, 239
 Glottis, 214, 216
 Glucocorticoids, 196, 207, 214
 Glucose, 199, 203, 209, 214
 Glucose Intolerance, 209, 214
 Glycosaminoglycan, 204, 214
 Governing Board, 214, 230
 Grade, 107, 108, 214
 Grafting, 214, 218

- Granulomatous Disease, Chronic, 214, 234
 Gravidity, 215, 228
 Groin, 215, 218
 Growth, 8, 10, 196, 198, 215, 221, 225, 229, 236, 242
 Gynecology, 37, 38, 43, 61, 215
- H**
- Haematuria, 215
 Haemophilia, 28, 215
 Hallucination, 215
 Haploid, 215, 229
 Headache, 13, 27, 45, 77, 150, 181, 193, 215, 230
 Headache Disorders, 215
 Health Promotion, 61, 215
 Health Services, 8, 15, 215
 Health Status, 10, 22, 215
 Heart attack, 202, 215
 Heart failure, 27, 104, 106, 211, 216
 Hemorrhage, 208, 215, 216, 239
 Hepatitis, 46, 139, 216
 Hepatocytes, 216
 Heredity, 214, 216
 Herpes, 70, 78, 181, 216
 Hiccup, 28, 216
 Homeopathic remedies, 13, 177, 183, 216
 Homeostasis, 136, 216
 Hormonal, 207, 216
 Hormone, 120, 122, 196, 207, 213, 216, 230, 235, 236
 Hormone therapy, 122, 216
 Horny layer, 212, 216
 Humeral, 216, 240
 Hydrogel, 216
 Hydrogen, 195, 200, 202, 216, 223, 226, 227
 Hydrophilic, 216
 Hydroxylysine, 205, 216
 Hydroxyproline, 197, 205, 216
 Hyperaemia, 206, 217
 Hypericum, 123, 217
 Hypersensitivity, 67, 217, 220, 235
 Hypertension, 49, 71, 75, 104, 202, 215, 217
 Hypnotherapy, 88, 123, 143, 217
 Hypnotic, 55, 217
 Hypothalamus, 196, 217, 221, 229, 236
- I**
- Id, 48, 65, 170, 171, 185, 190, 192, 217
 Ileus, 120, 217
 Immune function, 112, 217
 Immune response, 198, 207, 217, 243
 Immune system, 137, 164, 210, 216, 217, 220, 221, 232, 242, 243
 Immunity, 27, 55, 195, 217
 Immunization, 217, 231
 Immunodeficiency, 7, 10, 112, 137, 176, 195, 217
 Immunodeficiency syndrome, 137, 217
 Immunosuppression, 217, 227
 Impairment, 112, 217, 222
 Implantation, 25, 218
 In vitro, 94, 218
 In vivo, 218, 241
 Incision, 218, 219
 Incontinence, 78, 211, 218
 Indicative, 137, 218, 228, 242
 Infarction, 73, 218
 Infection Control, 35, 218
 Infertility, 35, 69, 72, 218
 Infiltration, 218, 244
 Inflammation, 16, 28, 65, 74, 75, 77, 78, 142, 199, 204, 205, 206, 212, 213, 216, 218, 220, 229, 231, 235, 242
 Inflammatory bowel disease, 60, 142, 218
 Inguinal, 25, 218
 Inguinal Hernia, 25, 218
 Inhalation, 216, 219, 229
 Initiation, 115, 219
 Inner ear, 109, 219
 Insight, 14, 156, 219
 Insomnia, 38, 71, 181, 219, 230
 Internal Medicine, 16, 25, 28, 42, 59, 64, 211, 219, 235
 Intervention Studies, 55, 219
 Intervertebral, 219, 221
 Intervertebral Disk Displacement, 219, 221
 Intestinal, 202, 219
 Intestine, 201, 219, 220
 Intoxication, 219, 244
 Intracellular, 218, 219, 230, 236
 Intramuscular, 215, 219
 Intravenous, 122, 219
 Invasive, 217, 219
 Involuntary, 156, 176, 211, 219, 224, 233, 238
 Ion Channels, 219, 225
 Ions, 200, 210, 216, 219, 223
 Irritable Bowel Syndrome, 71, 120, 156, 219
- J**
- Joint, 34, 77, 107, 108, 199, 220, 227, 238, 239, 240
- K**
- Kb, 162, 220
 Keratoconjunctivitis, 220, 237
 Keratoconjunctivitis Sicca, 220, 237
- L**
- Labile, 205, 220
 Labyrinth, 204, 219, 220, 236, 243
 Lacrimal, 212, 220, 237
 Large Intestine, 142, 202, 209, 219, 220, 233, 237
 Latent, 113, 220
 Leukocytes, 201, 203, 208, 220
 Leukotrienes, 199, 220

- Library Services, 190, 220
 Ligament, 220, 231, 238
 Lipid, 204, 220
 Liver, 58, 62, 72, 195, 199, 202, 209, 211, 212, 213, 214, 216, 220
 Localized, 25, 33, 213, 218, 220, 224, 229
 Locomotion, 17, 220, 221, 229
 Locomotor, 17, 221
 Low Back Pain, 13, 29, 32, 40, 49, 72, 114, 121, 122, 221
 Low-calorie diet, 33, 221
 Lumbar, 200, 219, 221
 Lymphatic, 72, 218, 221
 Lymphocyte, 55, 195, 199, 217, 221
 Lymphocyte Count, 55, 195, 221
M
 Malignant, 195, 199, 221, 225, 235
 Mastication, 107, 108, 221
 Medial, 33, 221, 236, 241
 Medial Forebrain Bundle, 33, 221
 Median Nerve, 202, 221
 Medical Records, 221, 235
 MEDLINE, 11, 19, 163, 221
 Membrane, 205, 206, 211, 212, 219, 221, 223, 234, 235, 240
 Memory, 55, 112, 208, 221
 Meninges, 203, 208, 221
 Menopause, 33, 40, 72, 222, 228, 230
 Menstrual Cycle, 222, 230
 Menstruation, 222, 230
 Mental, v, 7, 14, 16, 27, 40, 123, 125, 136, 162, 166, 199, 203, 208, 221, 222, 224, 230, 231, 232
 Mental Disorders, 125, 222, 230, 231
 Mental Health, v, 7, 14, 40, 123, 125, 162, 166, 222, 231, 232
 Mental Processes, 222, 232
 Mentors, 20, 21, 222
 Meperidine, 26, 222
 Mercury, 84, 222
 Mesolimbic, 222, 243
 Meta-Analysis, 32, 222
 Metastasis, 55, 222
 MI, 45, 46, 194, 222
 Microbe, 223, 241
 Microbiology, 47, 196, 223
 Midwifery, 46, 143, 223
 Mineralocorticoids, 196, 207, 223
 Modification, 7, 104, 197, 223, 232
 Molecular, 33, 82, 163, 166, 201, 206, 223, 240, 242
 Molecular Structure, 223, 242
 Molecule, 199, 200, 204, 205, 210, 214, 223, 227, 233
 Monitor, 16, 108, 123, 156, 223
 Morphine, 222, 223, 224, 226
 Motor Endplate, 114, 223
 Mucins, 223, 235
 Mucociliary, 223, 237
 Mucositis, 106, 223
 Mucus, 223, 242
 Muscle Relaxation, 109, 224
 Muscle tension, 156, 224
 Music Therapy, 55, 224
 Myelin, 208, 224
 Myocardial infarction, 207, 222, 224
 Myocardial Ischemia, 104, 154, 224
 Myocardium, 222, 224
N
 Naloxone, 104, 224
 Narcolepsy, 211, 224
 Narcotic, 222, 223, 224
 Nausea, 13, 34, 35, 37, 56, 103, 113, 176, 224, 230
 NCI, 1, 8, 53, 103, 104, 106, 124, 161, 176, 204, 224
 Neck Pain, 23, 35, 113, 224
 Necrosis, 218, 222, 224
 Needle Sharing, 10, 225
 Neoplasm, 225, 235
 Nerve Fibers, 195, 225
 Nervous System, 200, 203, 225, 228
 Networks, 22, 41, 124, 225
 Neurologic, 42, 111, 225
 Neurology, 4, 27, 33, 58, 61, 225
 Neuromuscular, 12, 195, 225
 Neuronal, 33, 200, 225
 Neurons, 213, 225, 240
 Neuropathy, 118, 225
 Neuropeptide, 29, 225
 Neurosis, 27, 225
 Neurotransmitters, 114, 197, 225
 Neutrons, 197, 225, 232
 Neutrophil, 27, 32, 226
 Nitrogen, 198, 213, 226, 242
 Norepinephrine, 196, 197, 211, 226
 Normotensive, 104, 226
 Nucleus, 219, 226, 236, 243
 Nucleus Accumbens, 226, 243
 Nurse Practitioners, 29, 226
O
 Obstetrics, 37, 38, 43, 226
 Ocular, 36, 226
 On-line, 7, 54, 193, 226
 Ophthalmic, 226, 234
 Ophthalmology, 33, 213, 226
 Opiate, 36, 223, 224, 226
 Opium, 223, 226
 Opportunistic Infections, 55, 105, 164, 195, 226
 Opsin, 227, 234, 235
 Optic Nerve, 227, 234

- Oral Health, 137, 227
 Osteoarthritis, 10, 13, 16, 23, 73, 106, 109, 110, 170, 227
 Osteopathic Medicine, 136, 227
 Ownership, 19, 227
 Oxidation, 112, 195, 199, 208, 227
- P**
- Pain Threshold, 11, 117, 227
 Palliative, 227, 241
 Palpation, 113, 227
 Palsy, 34, 66, 227
 Pancreas, 74, 195, 209, 227
 Pancreatic, 104, 202, 227
 Pancreatic cancer, 104, 227
 Paralysis, 120, 137, 212, 228, 238
 Paranasal Sinuses, 228, 237
 Parity, 5, 228
 Parturition, 226, 228
 Pathogenesis, 121, 228
 Pathologic, 207, 217, 228, 237
 Pathophysiology, 114, 228
 Patient Education, 53, 173, 188, 190, 194, 228
 Patient Satisfaction, 115, 136, 228
 Pediatrics, 14, 31, 43, 44, 46, 228
 Peer Review, 39, 56, 228
 Pelvic, 25, 57, 74, 122, 211, 228, 231
 Pelvis, 195, 221, 228, 242
 Perception, 6, 156, 215, 228, 235
 Perennial, 217, 228
 Pericardium, 228
 Perimenopausal, 58, 228
 Peripheral Nervous System, 118, 208, 227, 228
 Phallic, 213, 229
 Pharmacist, 60, 229
 Pharmacologic, 9, 53, 198, 229, 241
 Phosphorylated, 204, 229
 Photoreceptors, 206, 229
 Physical Examination, 12, 119, 229
 Physical Therapy, 109, 229
 Physiology, 11, 12, 32, 41, 56, 200, 211, 215, 229
 Pigments, 202, 229, 234
 Pilot study, 45, 112, 229
 Pituitary Gland, 207, 229
 Placebos, 4, 5, 175, 229
 Plant Oils, 156, 229
 Plants, 51, 181, 202, 203, 204, 214, 217, 226, 229, 242
 Plaque, 200, 229
 Pneumonia, 206, 229
 Poisoning, 70, 219, 222, 224, 229
 Polyarthritis, 220, 229, 237
 Polypeptide, 197, 205, 229
 Posterior, 197, 200, 224, 227, 230
 Postmenopausal, 32, 230
 Postnatal, 46, 230, 239
 Postoperative, 13, 27, 56, 120, 222, 230
 Postoperative Nausea and Vomiting, 56, 230
 Postsynaptic, 223, 230, 240
 Potassium, 119, 223, 230
 Potentiating, 197, 230
 Practice Guidelines, 115, 166, 230
 Preclinical, 8, 230
 Precursor, 112, 199, 203, 210, 226, 230, 242
 Pregnenolone, 4, 230
 Premenstrual, 38, 75, 230
 Premenstrual Syndrome, 38, 75, 230
 Prevalence, 7, 14, 16, 40, 46, 47, 62, 63, 101, 230
 Primary endpoint, 107, 230
 Primary Prevention, 112, 230
 Progression, 6, 55, 198, 231
 Projection, 226, 227, 231, 233, 243
 Proline, 205, 216, 231
 Prostaglandins, 199, 231
 Prostate, 37, 40, 75, 184, 204, 231, 234
 Prostate gland, 184, 204, 231
 Prostatitis, 75, 184, 231
 Protein S, 139, 201, 231
 Proteins, 197, 199, 205, 208, 223, 226, 231, 236
 Proteolytic, 97, 197, 205, 231
 Protocol, 184, 229, 231
 Proximal, 210, 231, 236
 Pruritus, 34, 231
 Psychiatry, 45, 46, 87, 116, 213, 231
 Psychic, 222, 225, 231
 Psychoactive, 231, 244
 Psychology, 4, 10, 47, 85, 232
 Psychoneuroimmunology, 142, 232
 Psychotherapy, 232, 233
 Public Health, 26, 29, 38, 45, 60, 62, 63, 164, 166, 232
 Public Policy, 163, 232
 Publishing, 23, 29, 54, 135, 136, 137, 232
 Puerperium, 226, 232
 Pulmonary, 67, 75, 119, 201, 206, 220, 232, 243
 Pulse, 223, 232
 Purulent, 195, 232
- Q**
- Quackery, 4, 40, 232
 Quality of Health Care, 228, 232
 Quality of Life, 55, 106, 111, 114, 118, 145, 232
- R**
- Race, 22, 232
 Radiation, 195, 213, 217, 232, 233, 241, 244
 Radiation therapy, 195, 232
 Radioactive, 216, 218, 233
 Radiology, 173, 233

- Radiopharmaceutical, 214, 233
- Randomized Controlled Trials, 11, 20, 32, 35, 233
- Reassurance, 5, 233
- Receptor, 196, 199, 233, 236
- Rectum, 201, 205, 209, 218, 220, 231, 233
- Recurrence, 119, 233
- Red Nucleus, 233, 243
- Refer, 1, 142, 205, 210, 213, 214, 216, 221, 226, 233, 241, 243
- Reflex, 26, 32, 46, 86, 92, 143, 171, 233
- Refraction, 233, 238
- Refractory, 27, 119, 233
- Regimen, 118, 210, 233
- Relaxation Techniques, 7, 92, 123, 171, 233
- Remission, 233, 234
- Reproductive system, 231, 234
- Respiration, 202, 223, 234
- Respiratory Burst, 27, 32, 234
- Restoration, 229, 234
- Retina, 206, 227, 234, 235
- Retinal, 38, 210, 227, 234, 235
- Retinal Vein, 38, 234
- Retinol, 234, 235
- Retrospective, 26, 34, 58, 234
- Retrospective study, 26, 58, 234
- Rheumatism, 235
- Rheumatoid, 10, 170, 235
- Rheumatoid arthritis, 10, 235
- Rheumatology, 4, 5, 15, 35, 60, 235
- Rhinitis, 65, 211, 235
- Rhodopsin, 227, 234, 235
- Rigidity, 229, 235
- Risk factor, 211, 235
- Rod, 235
- S**
- Saliva, 108, 235
- Salivary, 108, 209, 212, 228, 235, 237
- Salivary glands, 209, 212, 235, 237
- Sarcoma, 103, 235
- Schizoid, 235, 244
- Schizophrenia, 235, 243, 244
- Schizotypal Personality Disorder, 235, 244
- Screening, 19, 85, 204, 236
- Second Messenger Systems, 225, 236
- Secretion, 207, 214, 220, 223, 236, 237
- Sedative, 197, 236
- Semen, 231, 236
- Semicircular canal, 219, 236
- Sensibility, 197, 236
- Sensor, 236
- Sepsis, 119, 236
- Septal, 221, 236
- Septal Nuclei, 221, 236
- Serotonin, 197, 236, 239, 242
- Serum, 197, 198, 205, 223, 236
- Sex Characteristics, 196, 198, 236
- Shoulder Pain, 35, 237
- Sicca, 36, 237
- Side effect, 57, 105, 117, 123, 176, 177, 196, 237, 241
- Signs and Symptoms, 13, 234, 237
- Sinusitis, 119, 237
- Skeletal, 104, 198, 237, 238
- Skull, 208, 237
- Small intestine, 142, 156, 202, 216, 218, 219, 237
- Smoking Cessation, 26, 237
- Smooth muscle, 198, 206, 223, 237, 238
- Social Environment, 232, 237
- Social Security, 233, 237
- Sodium, 49, 223, 237
- Soft tissue, 114, 115, 201, 237
- Soma, 237
- Somatic, 104, 196, 207, 228, 237
- Sound wave, 206, 238
- Spasm, 216, 238
- Spastic, 32, 61, 76, 122, 220, 238
- Spasticity, 123, 238
- Spatial disorientation, 210, 238
- Specialist, 185, 238
- Species, 97, 202, 214, 232, 238, 239, 243, 244
- Specificity, 36, 196, 238
- Spectrum, 9, 238
- Spinal cord, 26, 31, 58, 61, 176, 195, 203, 221, 222, 225, 228, 233, 238
- Spinal Cord Injuries, 31, 238
- Spinous, 212, 238
- Sprains and Strains, 77, 221, 238
- Steel, 156, 238
- Stem cell transplantation, 106, 238
- Stem Cells, 238, 239
- Sterility, 35, 218, 239
- Steroid, 207, 230, 239
- Stifle, 9, 239
- Stimulants, 214, 239
- Stimulus, 104, 210, 215, 219, 233, 239, 241
- Stomach, 77, 195, 209, 212, 213, 216, 224, 237, 239
- Stool, 205, 218, 219, 220, 239
- Stress, 20, 27, 34, 75, 105, 111, 113, 120, 121, 136, 207, 219, 224, 235, 239
- Stroke, 13, 32, 56, 77, 125, 162, 202, 239
- Stromal, 211, 239
- Subacute, 218, 237, 239
- Subarachnoid, 215, 239
- Subclinical, 218, 239
- Subcutaneous, 35, 117, 215, 239
- Subspecies, 238, 239
- Suction, 10, 239
- Sumatriptan, 28, 239
- Superoxide, 234, 240

Supplementation, 121, 240
 Suppression, 6, 207, 240
 Symphysis, 203, 231, 240
 Symptomatic, 23, 112, 240
 Symptomatic treatment, 23, 240
 Synapses, 225, 240
 Synaptic, 223, 240
 Synergistic, 115, 240
 Systemic, 77, 201, 218, 233, 240
 Systolic, 217, 240

T

Telefacsimile, 182, 240
 Telomere, 215, 240
 Tendon, 238, 240
 Tennis Elbow, 13, 27, 240
 Testimonials, 5, 240
 Therapeutics, 32, 33, 43, 179, 241
 Thermal, 226, 241
 Thermography, 36, 241
 Thiamine, 4, 241
 Thoracic, 200, 209, 221, 241
 Threshold, 36, 217, 241
 Thrombosis, 231, 239, 241
 Thromboxanes, 199, 241
 Thrombus, 207, 218, 224, 241
 Tibia, 239, 241
 Tin, 202, 241
 Tone, 226, 238, 241
 Tooth Preparation, 196, 241
 Toxic, v, 217, 225, 227, 241, 242
 Toxicity, 3, 123, 210, 222, 241
 Toxicology, 164, 241
 Toxin, 30, 58, 241
 Transcutaneous, 11, 32, 34, 62, 242
 Transfection, 201, 242
 Transmitter, 195, 219, 226, 240, 242
 Tricyclic, 123, 197, 242
 Tryptophan, 205, 236, 242

U

Ulcer, 74, 242
 Ulceration, 142, 242

Ulcerative colitis, 142, 218, 242
 Ureters, 242
 Urethra, 231, 242
 Urinary, 10, 25, 38, 78, 124, 211, 218, 242
 Urinary tract, 10, 25, 38, 242
 Urine, 201, 211, 215, 218, 242
 Uterus, 203, 211, 222, 234, 242

V

Vaccine, 164, 231, 242
 Vascular, 74, 201, 215, 218, 241, 242
 Vein, 219, 234, 242
 Venous, 202, 231, 242
 Venter, 242
 Ventral, 33, 217, 226, 242, 243
 Ventral Tegmental Area, 33, 243
 Ventricle, 217, 226, 232, 240, 243
 Vertebrae, 219, 238, 243
 Vertebral, 30, 243
 Vestibular, 17, 108, 109, 243
 Vestibule, 204, 219, 236, 243
 Veterinary Medicine, 41, 42, 163, 243
 Viral, 55, 137, 243
 Viral Load, 55, 243
 Virulence, 241, 243
 Virus, 7, 10, 69, 112, 137, 176, 195, 203, 229, 243, 244
 Viscera, 238, 243
 Visceral, 33, 78, 207, 243
 Vitro, 243
 Vivo, 243
 Volition, 219, 243

W

White blood cell, 198, 220, 221, 223, 226, 243
 Withdrawal, 36, 222, 243
 Wounds, Gunshot, 238, 244

X

Xenograft, 198, 244
 X-ray, 118, 232, 233, 244

Z

Zoster, 70, 78, 216, 244

