THE ROLE OF INTEGRATIVE HEALTH IN IBD CARE

Maria R. Mascarenhas

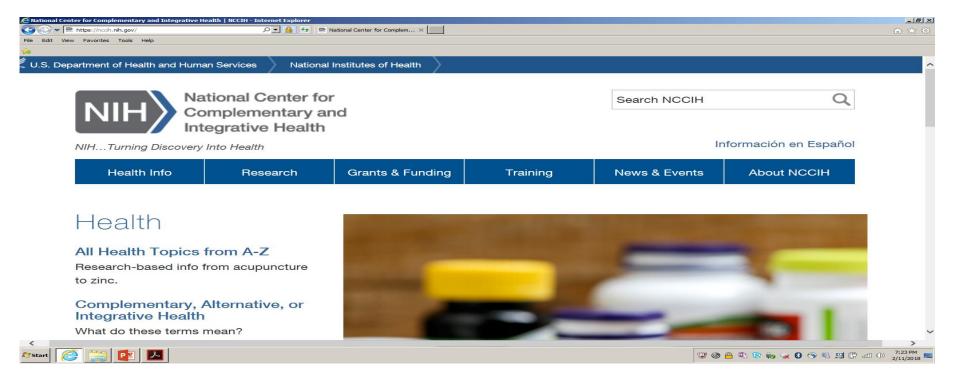
February 2019



WELLNESS AND OPTIMAL HEALTH







- If a non-mainstream practice is used **together with** *conventional medicine*, it's considered "complementary."
- If a non-mainstream practice is used **in place of** conventional medicine, it's considered "alternative."
- "integrative" health care... involves bringing conventional and complementary approaches together in a coordinated way.



COMPONENTS

Natural Products

- Herbs
- Vitamins and minerals
- Probiotics
- Nutrition

Mind and Body Practices

- Yoga
- Chiropractic and osteopathic manipulation
- Meditation/mindfulness
- Massage therapy
- Acupuncture
- Relaxation techniques (breathing, guided imagery, progressive muscle relaxation)
- Tai chi, Qi gong, healing touch, Reiki
- Hypnotherapy

Other

• Traditional healers, Ayurveda, TCM, Homeopathy, Naturopathy





HOW OFTEN IS IH USED?

NCCIH: Use of Complementary Health Approaches Among Children Aged 4–17 Years in the United States: National Health Interview Survey

- CAM use was unchanged: 12% in 2007
 & 11.6% in 2012
- Most commonly used complementary health approaches
 - non-vitamin, non-mineral dietary supplements
 - chiropractic/OM, yoga, tai chi or gi gong
- Most common indications
 - back or neck pain
 - · head or chest cold
 - anxiety or stress
 - other musculoskeletal conditions

• Common in pediatric IBD: 22-84% worldwide

TABLE 1. Commonly used complementary and alternative medicine therapies in children with inflammatory bowel disease

Type	Examples	
Biochemical	Dietary supplements—probiotics, high-dose vitamins, fish oil,	
	Herbal remedies-Aloe vera, garlic, curcumin	
	Botanicals—Marijuana	
Lifestyle	Diet changes—dairy-free diet, gluten-free diet, special carbohydrate diet	
	Mind-body therapies-mindfulness,	
	psychotherapy, meditation, hypnosis	
Biomechanical	Massage, chiropractic therapy	
Bioenergetic	Acupuncture, moxibustion, healing touch, prayer	

CAM = complementary and alternative medicine; IBD = inflammatory bowel disease.

TABLE 2. Common factors associated with complementary and alternative medicine use

Moderate to severe disease
Adverse effects to standard IBD medications
Lack of efficacy of standard IBD medications
Use of immunomodulators and biologics
Use of steroids
Poor quality of life
School absences
Parental factors:
Parental education beyond high school
White ethnicity
Private insurance
Parental use of CAM

CAM = complementary and alternative medicine; IBD = inflammatory bowel disease.



DIET AND DIETARY SUPPLEMENTS

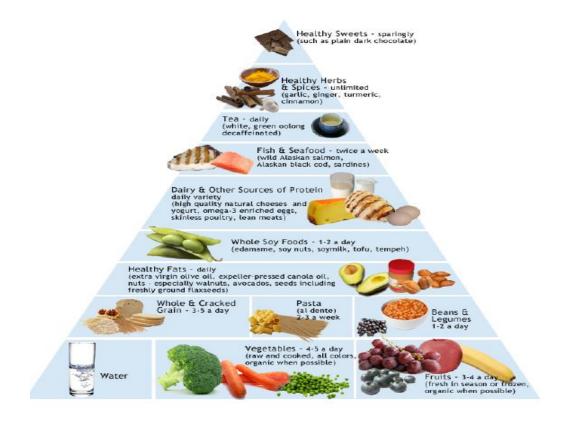
- Diets
 - Exclusive enteral nutrition
 - Food avoidance
 - dairy, nuts/seeds, spicy foods, corn, gluten: no evidence
 - maltodextrin, emulsifiers, chemicals and preservatives: emerging evidence
 - Specific Carbohydrate Diet (SCD)
 - Anti-inflammatory Diet
- Supplements
 - Probiotics
 - UC: oral VSL#3; L reuteri enema; oral E coli Nicola
 - Fish oil: mixed data but probably not effective
 - Vitamins: no efficacy





ANTI-INFLAMMATORY DIET PYRAMID

Pediatric Anti-Inflammatory Diet Pyramid



H. McClafferty, MD FAAP



HERB AND BOTANICAL TREATMENTS

- Best efficacy
 - Adults with UC: Plantago ovata, curcumin
 - Adults with CD: Wormwood
- Variable efficacy
 - Boswellia serrata, andrographis paniculata, primrose oil, aloe vera
- Children: no data
- Marijuana
 - Cannabinoids have anti-inflammatory, analgesic and anti motility properties via receptors in the GI tract
 - · Improved symptoms in adults and children
 - No change in disease activity
 - AAP: opposes use in teenagers up to age 21 years due to concern for negative health and brain development

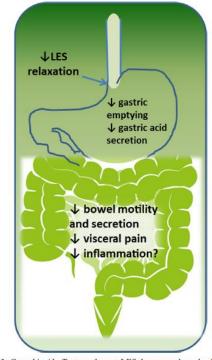


Fig. 1 Cannabinoid effects on the gut. LES, lower esophageal sphincter







MIND-BODY MODALITIES



- Adults
 - Mindfulness, yoga and CBT
 - improvement in anxiety, QOL without any significant effect on disease activity
- Children
 - Limited data
 - Cognitive Behavioral Therapy
 - Most beneficial
 - reduction in depression and improvement in psychological functioning
 - but no improvement in IBD indices
 - Biofeedback
 - Pain, anxiety
 - Clinical Hypnosis
 - decreased inflammation & improved QOL





YOGA



- Few studies, although widely used
- CHOP study: Dr Albenberg
- Benefits
 - mood enhancing properties
 - inhibition of physiologic stress & inflammation
 - improved regulation of sympathetic nervous system & hypothalamic-pituitary-adrenal system
 - improved quality of life



EXERCISE



- Limited data
- Improves bone mineral density
- Regular exercise
 - early in life may help prevent CD
 - exert a beneficial effect on disease course
 - improve inflammatory parameters
 - improve psychological status
 - improve quality of life
 - help with stress management
- Moderate exercise
 - improves mucosal immune function
 - maintains a healthy microbiome

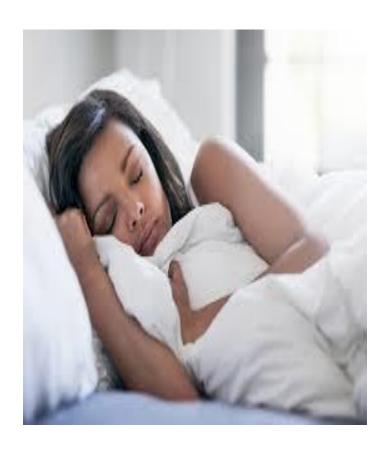


MASSAGE & ACUPUNCTURE

- Massage therapy
 - poorly studied in IBD
- Acupuncture
 - improves inflammation & symptoms
 - animal & human adult studies: limited data
- Current clinical trials
 - Encouraging but are insufficient to recommend these therapies as alternatives to conventional IBD therapies



SLEEP



- Increased prevalence of sleep disturbances
- Factors: disease activity, depression, female sex, smoking, corticosteroid & narcotic use
- Over a 6 month period, poor sleep was associated with:
 - increased risk of flare in CD
 - but not UC
- Microbiome changes in animal models
- More research needed



At CHOP

Integrative Nutrition
Program
Food Reactions Clinic
Integrative
Gastroenterology
Outpatient & Inpatient
Consultation Programs

Patient
Family
Staff
Community

Clinical Care
Research
Innovation
Education

Acupuncture
Massage
Yoga
Mindfulness
Aromatherapy
Energy therapies

An evidence-based Center of Excellence

Pharmacy
Child Life
Nursing
Chaplain
Pain Team
Subspecialist network
Psychology
Employee Wellness



INTEGRATIVE GASTROENTEROLOGY







- Target Audience
 - Patients with GI symptoms: dyspepsia, reflux, nausea, colic, IBS, constipation & gastroparesis
 - IBD
- Osteopathic manipulation
- IH Nutrition visits at same time







MIND BODY MODALITIES

	Active	Planning
Patients	Yoga Mindfulness Massage Aromatherapy Outpatient acupuncture Child Life therapies	Inpatient acupuncture Reiki/healing touch Clinical hypnosis
Parents	Yoga Reiki	Massage
Staff	Yoga Mindfulness	







INTEGRATIVE HEALTH FAMILY EDUCATION DAY

Integrative Approaches to Pain Management



Join us for this half-day symposium for adolescents, parents and caregivers to learn about integrative approaches to pediatric pain management.

SUNDAY, APRIL 7, 2019 Noon — 5 p.m.

Ruth and Tristram Colket, Jr. Translational Research Building on the Raymond G. Perelman Campus 3501 Civic Center Blvd. Ground floor conference rooms Philadelphia, PA 19104

Complimentary parking will be available in the Buerger Center for Advanced Pediatric Care garage. Today, many families are looking for a comprehensive approach to health and wellness. Integrative healthcare focuses on the whole child, not just on disease prevention and treatment. Incorporating complementary care (such as mindfulness, aromatherapy, acupuncture, etc.) with traditional medical management has been proven to reduce stress, speed healing and improve functioning.

Using a variety of treatment approaches allows adolescents to identify which strategies are most effective in managing their pain, as caregivers learn how best to support their child's efforts.

REGISTRATION INFORMATION

There is a non-refundable registration fee of \$10 per family, Registration is required for each member of the party who will attend. There will be no childcare available, so **this event is restricted to attendees 12 years and older**. Snacks will be provided.

If the registration fee causes a financial burden, please email integrativehealth@email.chop.edu.
Kindly RSVP by Monday, March 25, 2019 at integrative-health.eventbrite.com.



(Except The Chalamon's Hospitas of Philamograta - suPRC) on a (NP) to









 $\underline{integrative health@email.chop.edu}$



CHOP.edu



215 590 5043









