A Study on the Prevalence And Usage of Complementary And Alternative Medicine Among Adults Using Allopathic Medicine in Father Muller Medical College

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I. Introduction

Complementary and Alternative Medicine (CAM) is a diverse group of medical and healthcare systems, practices and products that are not considered part of conventional medicine yet complement it by diversifying the conceptual frameworks of medicine or by satisfying a demand not met by orthodoxy. The United States (US) National center for CAM therapies divides CAM into four categories: mind body systems, manipulative and body based practices, energy medicine and biologically based practices.

Medical use of CAM is on the increase worldwide. The growing popularity of biologically based CAM products has been attributed to a variety of factors. There exists a wide geographical variation in the prevalence estimates of CAM products utilization and the types of CAM therapies used. The Global prevalence of CAM use is 9.8-76%. The prevalence is estimated at 38% in the United States in adults 18 yrs and older. 51.8% in the United Kingdom and 68.9% in Australia. In Canada, 12.4% of people visit a CAM practitioner.

In our setup, not much is known about the prevalence of CAM usage among the target population. Hence the purpose of this study was to determine as to why patients prefer CAM therapy.

II. Objectives

1. To find out the prevalence of usage of CAM among patients using allopathy
2. To find out the factors which influenced the patients to opt for CAM

III. Methods

It was a descriptive cross-sectional study. Participation was voluntary and informed consent was obtained from all subjects prior to participation. No financial incentive was offered. A questionnaire regarding patterns of CAM usage was administered to 40 individuals. The average administration time of the questionnaire was 20 minutes. The questionnaire included questions regarding personal use of CAM and the type of CAM used. The questionnaire also investigated the following characteristics of the CAM product use: frequency, reason of use, motives that led to CAM use, main source of advice about CAM use, satisfaction with CAM use, disclosure of CAM use to their physician as well as attitude towards CAM use. The questionnaire further explored the sociodemographic and health-related characteristics of respondents including age, sex, education, marital status, employment status.

IV. Results

Age distribution:
Out of a total sample of 40, 55% (22) were in the age group of 31-50 yrs followed by 25% (10) in the age group of above 50 yrs and 20% (8) in age group of below 30 yrs.

Sex distribution:
Males were 55% and females were 45% out of a total of 40

Educational level:
50% were having a pre-university degree or higher followed by 30% with primary education or lower and 20% with high school level education.

Marital status distribution:
75% (30) were married and 25% (10) were unmarried

Employment status distribution:
70% were employed and 30% were unemployed
Type of CAM used:
Vitamins and minerals were the most commonly used CAM therapies with 90% of the population surveyed using them and 80% using folk herbs and folk foods. Combined usage of both was significantly high in majority of the population. Folk herbs included traditional herbs and herbal extracts which were used to treat and/or prevent a health condition. For example, green tea, thyme tea etc. Natural health products includes products and mixes with claims of treatment of multiple health conditions including obesity, chronic diseases like diabetes and hypertension. Folk foods referred to foods like honey, onion, garlic etc included in the diet for their believed health benefits. Vitamins and Minerals consist of single and multimineral and vitamin products.

Awareness of CAM route:
70% pts were suggested to go for CAM therapies by a family member or friend while 15% were motivated by religious reasons.

Frequency of usage:
60% of the people in the survey used CAM daily followed by 25% who use it weekly once or more and 15% were irregularly using CAM.

Reason for CAM usage:
The most common reason was for building up the energy and immunity level (60%) followed by treatment of chronic illness in 25% and others 15%.

Precipitating factors for CAM use:
A large percentage of people (80%) said that lack of time spent by doctors with patients as compared to CAM practitioners was big draw towards CAM and also reported the cost effectiveness of CAM compared to allopathy.

User satisfaction:
Satisfaction with CAM use was reported by 70% and they said that they would recommend usage of CAM to others whereas 30% were unsatisfied.

Openness about CAM usage:
Only about 20% confided with their doctor regarding their CAM usage as opposed to 80% who did not. Commonest Reason for the same being perceived lack of belief among Doctors in CAM. 70% patients also said that response of Doctors to CAM was not very encouraging regarding CAM use.

V. Discussion
The results of the study point towards a significant and increasing usage of CAM among the people. The prevalence was nearly equal among those who had higher socioeconomic status and those who had a lower socioeconomic status as opposed to the popular belief of CAM not being popular among higher strata of society. Men and women opted for CAM in equal numbers. The most commonly used CAM therapy was vitamins and mineral supplements and folk foods. Majority of patients were suggested to go for CAM by their close acquaintances and perceived side effects of allopathic medicines was a big factor in this decision.

A significant finding in this study showed that patients took to CAM because of cost effectiveness and also more empathy received from CAM practitioners than doctors. Satisfaction levels with CAM usage were high and many said they would recommend it to others.

VI. Conclusion
CAM has been around ever since mankind evolved. Many forms of CAM also have deep rooted religious sentiments attached to them. A majority of CAM practitioners are people who have understood the needs of the patients and are easily accessible. Even though western medicine has evolved over the years, it is still not cost effective for a significant proportion of the population compared to CAM. Studies have also shown certain Folk Foods like Green tea, Honey, Turmeric etc as having health benefits.

With more and more people being drawn to CAM use, western Medicine needs to look at CAM from a fresh perspective instead of dismissing its benefits arbitrarily. Doctors have to note that in the study, most people opted for CAM because of the empathy and time spent by the CAM practitioner with them. Lack of time spent by a Doctor in a busy hospital/clinic has drawn many people towards CAM.
Therefore, health policy and decision makers need to facilitate proper regulation and integration of CAM into mainstream medicine and educate healthcare providers and the public alike on the safe and effective use of CAM therapies.

References


