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Integrative Health:

Comprehensive Care for Your Mind and Body

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October 3, 2017



What is Integrative Health?

Bringing together conventional and complementary approaches in a coordinated way

National Center for Complementary and Integrative Health (NCCIH)

Alternative Complementary Integrative Medicine



Integrative Health as a Growing Trend

There is a rising interest amongst Americans to incorporate Integrative Medicine (IM) practices into their healthcare regimen.

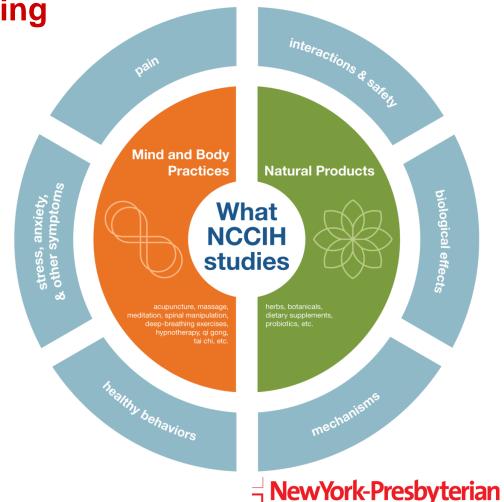
According to the National Center for Complementary and Integrative Health

(NCCIH) at the National Institute of Health (NIH), nearly 4()

of Americans use IM.

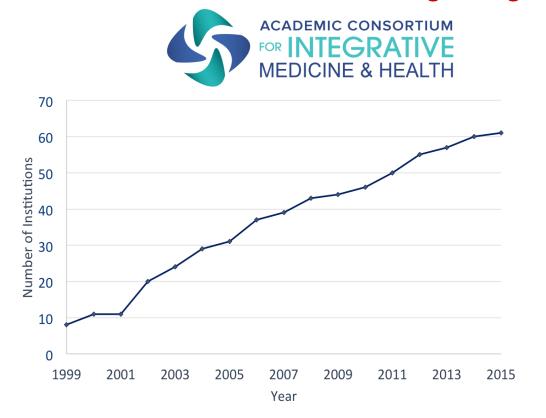
Increased Government Funding

The National Center for
Complementary and Integrative
Health (NCCIH) is the Federal
Government's lead agency for
scientific research on
complementary and integrative
health approaches.





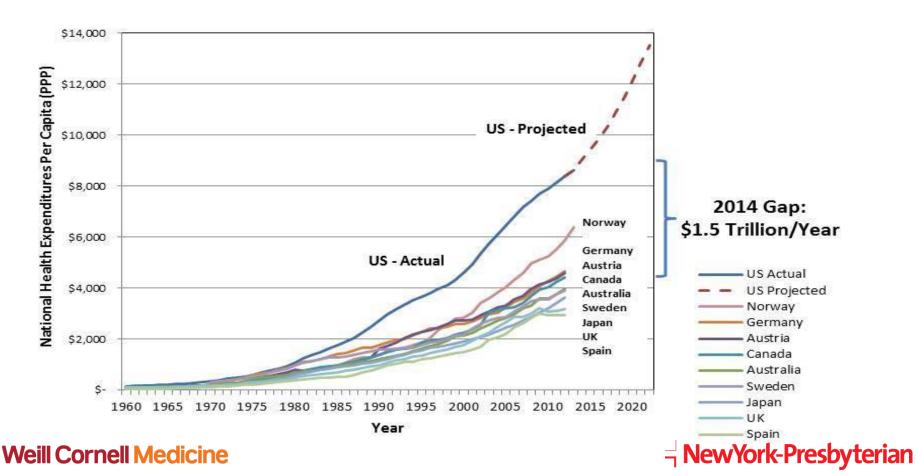
Academic Institutions Advancing Integrative Health



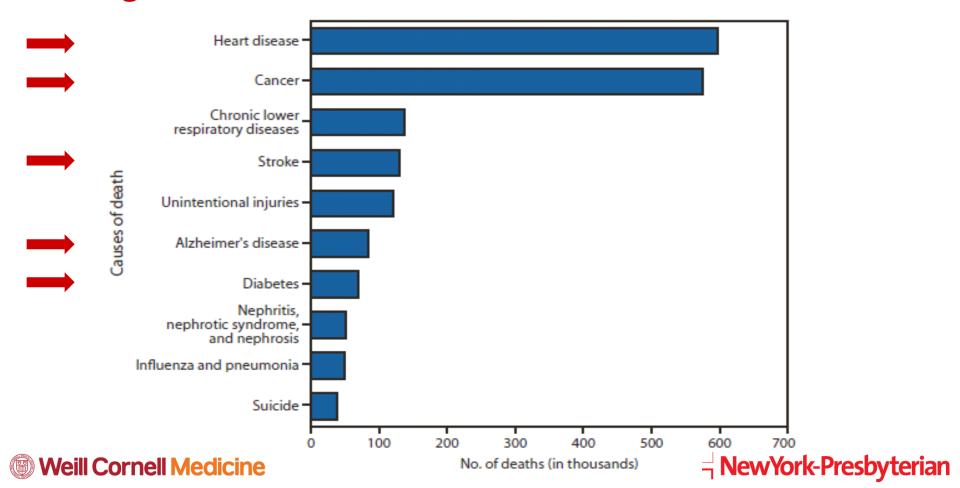
Members (sampling):

- Mayo Clinic
- Johns Hopkins University
- Weill Cornell Medicine
- Columbia University
- Cleveland Clinic
- Duke University
- Harvard Medical School
- MD Anderson
- Mount Sinai Medical Center
- Northwestern University
- Stanford University
- UCSF

U.S. Healthcare Expenditures

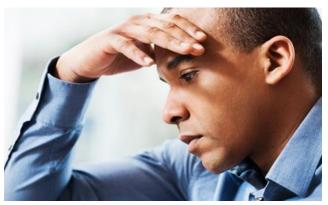


Leading Causes of Death in the U.S.



Current Interventions Are Not Sufficient











What is the Objective of Integrative Health and Wellbeing?

Individualized healthcare combining conventional and evidence based integrative medical treatments to promote physical, psychological, and spiritual well-being

Nutrition Yoga Health Coaching

Psychology Meditation Relaxation & Breathing
Techniques

Acupuncture Massage Therapy Pilates



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What Should I be Eating?



What is inflammation?

 Inflammation is the mechanism in which the body protects itself from injury, irritation, or infection.



- Acute inflammation is a response to tissue damage and lasts only a handful of a days. It isolates damaged areas and promotes healing.
- Chronic systemic inflammation affects your entire body and negatively impacts health.



Can we put out the fire with diet?



What does the research say?

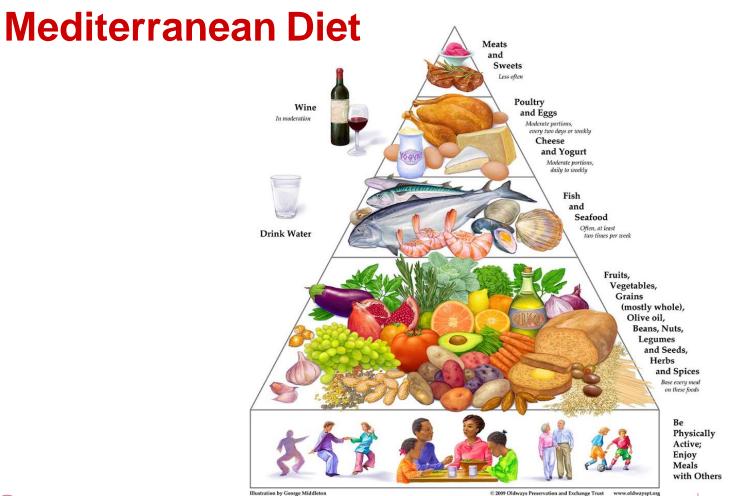
- Studies have shown that diets high in refined starches, sugars, saturated fats, and trans fats and low in fruits, vegetables, whole grains, and omega-3 fatty acids appear to turn on the inflammatory response.
- A study that looked at fruit and vegetable intake among adults found that those who had the highest consumption (>2 servings of fruit and 3 servings of vegetables per day) had significantly lower levels of inflammatory markers in the blood as well as decreased biomarkers of oxidative stress.

Giugliano D, Ceriello A, Esposito K. The effects of diet on inflammation: emphasis on the metabolic syndrome. 2006.

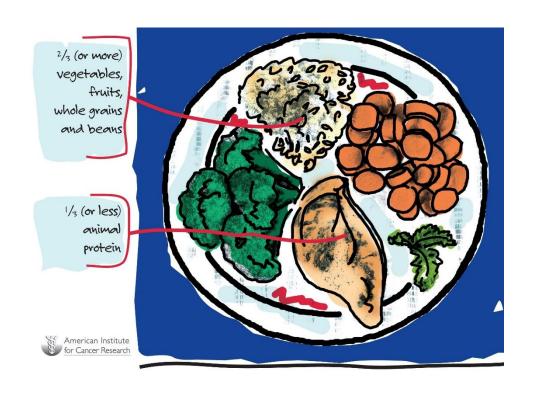
Root M, McGinn M, Nieman D, et al. Combined Fruit and Vegetable Intake Is Correlated with Improved Inflammatory and Oxidant Status from a Cross-Sectional Study in a Community Setting. 2012.



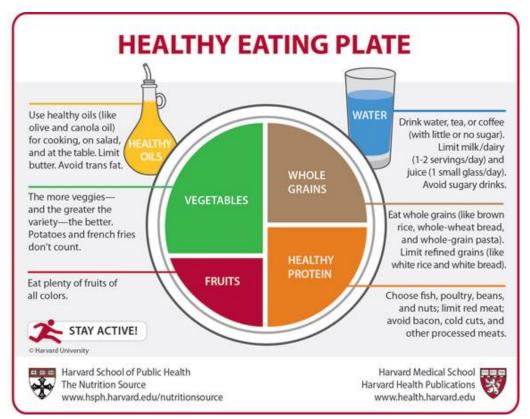




The New American Plate from AICR



Healthy Eating Plate from the Harvard School of Public Health



What do all these diets have in common?

- Focus on a variety of vegetables and fruits
- Have smaller amounts of protein and choose lean sources
- Choose whole grains instead of refined carbohydrates
- Use healthy fats
- Add beans, nuts, and seeds
- Cook with herbs & spices



Bottom line: Minimally, if at all, processed foods

"SAD Diet" ⊗



Fried food



Processed meats



- Trans fat
- Excess omega-6 fats



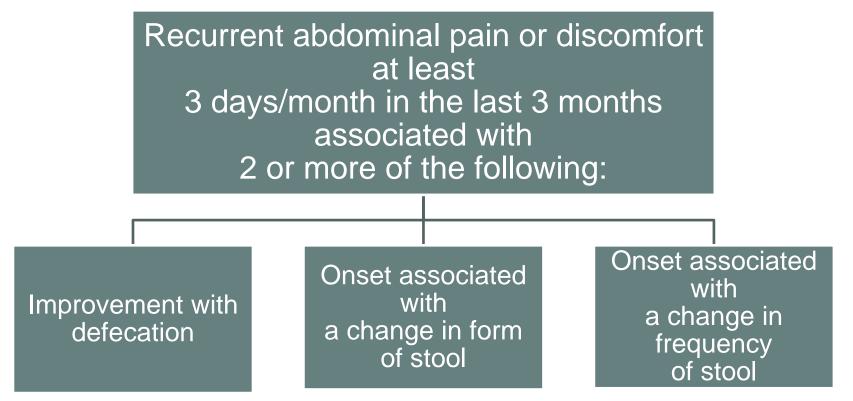
- Refined flour
- Sugar
- Lack of fiber

- Diabetes
- High cholesterol
- High blood pressure
- Stroke
- Cancer
- Kidney disease
- Osteoporosis
- Alzheimer's
- Obesity
- Irritable Bowel Syndrome

"SAD Diet" versus "Health-Supportive Diet" for our gut



What is Irritable Bowel Syndrome (IBS)?

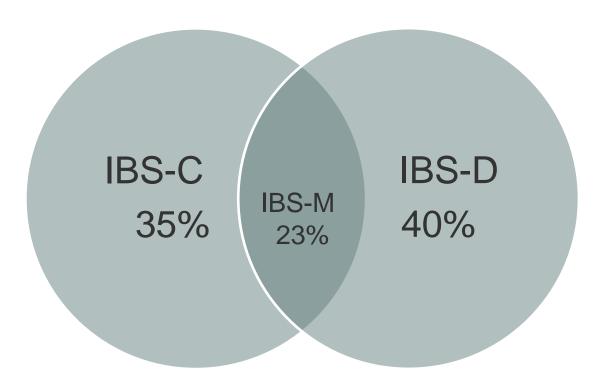


And no "red flags": weight loss, rectal bleeding, family history of cancer/IBD, unexplained abnormalities in bloodwork or physical findings



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Types of IBS



What causes IBS?

- Causes are not completely clear, but it appears that faulty messages from the Enteric
 Nervous System which sends messages to the brain about our digestion plays a major role.
 - Either a message is sent that says "you're still in pain" or amplifies the message incorrectly to say "I'm really really in a lot of pain".
 - This faulty messaging can also tell the gut to contract too often (cramping/diarrhea) or not to contract as it should (bloating/constipation).
- Small Intestine Bacterial Overgrowth
- Foodborne illness
- Stress
- Currently there is no cure, but there are many new ways to keep it under control.
- **Weill Cornell Medicine**

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Prevalence of IBS

 Affects 15-20% of the population, but may be higher due to patients under reporting

2nd leading cause of missed days from work each year

Mostly women; typically diagnosed between the ages of 15-40

Multidisciplinary approach

- Dietary changes: fiber intake, low-FODMAP diet
- Supplements: herbal, probiotics, magnesium
- Medications: Tricyclics, SSRI, Anti-diarrheals, Laxatives, Antibiotics, Antispasmodics
- Emotional support: Mindfulness based stress reduction, Cognitive behavioral therapy, Hypnotherapy, Biofeedback, Meditation
- Acupuncture



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What is the Low FODMAP diet?

- <u>Fermentable Oligo-, Di-, and Monosaccharides and Polyols</u>
- Short-chain carbohydrates that are:
 - Poorly absorbed
 - Rapidly fermentable
 - Osmotically active



Bloating Gas

Diarrhea

Constipation

- Developed in 2005 by a team of dietitians and physicians in Australia
- Clinically effective: 50-86% of patients following a low-FODMAP diet feel better



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High FODMAP Foods

Oligosaccharides (Fructans & Galactans)

- Nectarine, peach, watermelon
- Artichoke, garlic, onion
- Kidney beans, black beans, peas, soybeans
- Cashews, pistachios
- Wheat, barley, rye, chicory root

Monosaccharides (Fructose)

- Apple, cherry, fig, mango, pear, watermelon
- Asparagus, artichoke, sugar snap peas
- Agave, honey, high fructose corn syrup

Disaccharides (Lactose)

 Milk, evaporated milk, yogurt, ice cream, custard, ricotta, cottage cheese

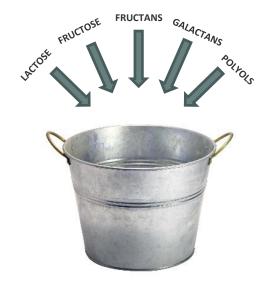
Polyols (Sorbitol & Mannitol)

- Apple, apricot, blackberry, nectarine, plum, watermelon
- Sugar-free gums and mints
- Cauliflower, mushrooms, snowpeas



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Cumulative effect of FODMAP intake



What **is** allowed on the Low-FODMAP diet

- Fruits: avocado*, banana, blueberries, cantaloupe, clementines, coconut*, grapes, honeydew, kiwi, lemon, lime, orange, papaya, pineapple, pagranate*, papaya, pineapple, pagranate*, pag
- II pepp es, chi Vegetables: alfalfa s s, beets k choy, oli*, br sels selvuts utternut squash*, cabbage*, ic IS, carrots, celeriac, cele la bar nt, endive, fennel, ginger, green erry to ard gre rn, c umber. ips, p beans, kale, lettuce, npkin adišhe y), seaweed, spinach, summer lives sca ns reen part hai viss squash, sweet potato turnii •h€ nuts, whi potatoes, zucchini taro wate
- Dairy: Almond milk, finned a conumnilk theddar, fee go cheese, trose-free trage cheese, lactose-free milk, lactose-free yogurt, parmesan, rice nink, swiss in the conumnilk theddar, fee go cheese, trose-free trage cheese, lactose-free milk, lactose-free lact
- Grains: almond flour, amaranth, oats, oat bran, polenta, popcorn, quinoa, rice, suitable gluten-free bread
- Nuts/see s: aimonas*, choseeds, vseeds azelnuts emp apas, pe s, pun ain see sunf ver seeds, walnuts
- Fats: all
- Sweeten s: sugar, map syrup, ste
- Other flavorings: all herbs and spices (as long as tney do not contain onion/garlic), apple cider vinefar, balsamic vinegar, capers, Dijon mustard, fish sauce, jam (made from sugar and low-FODMAP fruit), marmalade, peanut butter, rice vinegar, soy sauce, vanilla extract, wasabi





How does the Low-FODMAP diet work?





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Mindful eating strategies

- Think about how hungry you are before eating
- Consider if you are eating for emotional reasons
- Sit and eat your meal in peace
- Eat slowly & chew well
- Use your 5 senses while eating
- Stop halfway through your meal
- Know your trigger foods or situations



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What is Acupuncture, and Can it Help Me?



What Is Acupuncture and Oriental Medicine?

Health care system based on natural energetic laws



Dates back thousands of years as a primary healthcare system in China and other parts of Asia

Includes various methods: Acupuncture, Herbal Medicine, Nutrition, Manual Body Work, (Tui Na), Qi Gong and Tai Chi

The New York Times

WORLD U.S. N.Y. / REGION BUSINESS TECHNOLOGY SCIENCE HEALTH SPORTS OPINION

Article Preview

Now, About My Operation in Peking; Now, Let Me Tell You About My Appendectomy in Peking...

By JAMES RESTONSpecial to The New York Times (); July 26, 1971, , Section , Page 1, Column , words



[DISPLAYING ABSTRACT]

PEKING, July 25 -- There is something a little absurd about a man publishing an obituary notice on his own appendix, but for the last 10 days this correspondent has had a chance to learn a little about the professional and political direction of a major Chinese hospital from the inside, and this is a report on how I got there and what I found.



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Philosophy

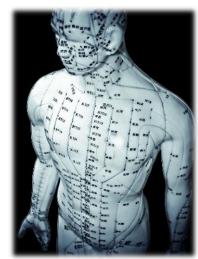
- Health as a balance between the opposing, yet mutually dependable forces of Yin and Yang and the flow of the vital energy force known as Qi
- In health, Qi flows freely along meridians to all parts of the body
- Disease results from excess, deficiency, or stagnation of Qi
- Strong belief that physical and emotional aspects of health care are interrelated but inseparable
- Emphasis on prevention





How Does Acupuncture Work

- Utilizes an energy system in the body that follows pathways, called meridians
- Gentle insertion and stimulation of thin, disposable, sterile needles at strategic points on the body along the meridians
- Each point provides a specific function
- Acupuncture balances and activates this energy



How Acupuncture Affects the Body

Researchers have proposed several processes to explain acupuncture's effects:

- Conduction of electromagnetic signals
- Stimulation of the hypothalamus and the pituitary gland
- Change in the secretion of neurotransmitters and neurohormones
- Activation of the body's natural opioid system

Effects of Acupuncture

Using today's technologies (fMRI, PET, EEG), researchers are able to examine effects of acupuncture on the brain and the body:

- Acupuncture promotes blood flow
- Acupuncture stimulates tissue healing
- Acupuncture facilitates release of analgesics
- Acupuncture reduces both the intensity and perception of chronic pain
- Acupuncture relaxes muscles spasm
- Acupuncture reduces stress



Conditions for which Acupuncture is helpful

There is evidence for the effectiveness of acupuncture for 117 conditions

Acupuncture is considered safe and cost-effective

- Allergic rhinitis
- Knee osteoarthritis
- Chemotherapy-induced and postoperative nausea and vomiting
- Migraine and Tension headache
- Low back pain and sciatica
- TMJ pain
- Postoperative pain
- IBS
- Insomnia



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McDonald J, Janz S. The Acupuncture Evidence Project: A Comparative Literature Review (Revised Edition). Brisbane: Australian Acupuncture and Chinese Medicine Association Ltd; 2017. http://www.acupuncture.org.au.



Acupuncture and IBS

- Gut-Brain Axis (GBA) is the link between the central nervous system and the enteric nervous system
- Central nervous system (CNS) and the GI tract interact via neurotransmitters or electrical signals
- Acupuncture activates the enteric nervous system (ENS), which inhibits inflammatory reactions and promotes damage repair
- Needle stimulation interferes with stimuli-pain cycle



Fang Z., Luyi W., Neurobiological Mechanism of Acupuncture for Relieving Visceral Pain of Gastrointestinal Origin Gastroenterology Research and Practice, Volume 2017, Article ID 5687496, https://doi.org/10.1155/2017/5687496
E. A. Mayer and K. Tillisch, "The brain-gut axis in abdominal pain syndromes," *Annual Review of Medicine*, vol. 62, pp. 381–396, 2011.



Acupuncture and IBS

GBA links the brain's emotional and cognitive areas with GI system

Acupuncture regulates GBA

IBS may be triggered by excess negative emotional activity, including anxiety and depression

Acupuncture may improve depression

Acupuncture may improve visceral hypersensitivity

Hypothalamus ACC, PFC u-Opioid' P2X₃↓ B-EP1 **PVN** AVP 1 Rostral ventral medulla V Dorsal reticular nucleus NRIL GFAP L DMH, MD 5-HT1 Neurons discharge (-) Neurons discharge (-) Spinal dorsal horn DCN P2X2 GFAP L WDRn discharge (-) Spinal cord OX42 I CRH1 CGRP P2X21 P2X₃ 1 **ENS** P2Y11 5-HT CRH1 pERK | B-EP 1 DCREB P381 B-EP↑ TNF-al ENK † SP/NK1R1 c-fos ↓ μ-Opioid 1 Enteric nervous system P2X21 P2X₁1 Acupuncture needle Surface acupoints (peripheral site)

Pei LX, et.al., Clinical Evaluation of Acupuncture Treating IBS-D Belonging to Liver Depression and Spleen Deficiency Sydrome. Friedrich M, et.al. Effects of antidepressants in patients with irritable bowel syndrome and comorbid depression.





Acupuncture and IBS

"Acupuncture for irritable bowel syndrome provided an additional benefit over usual care alone. The magnitude of the effect was sustained over the longer term. Acupuncture should be considered as a treatment option to be offered in primary care alongside other evidenced based treatments."

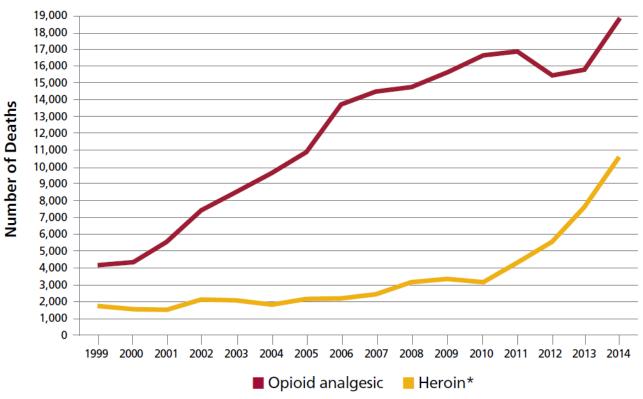


Pain



Low back pain is one of the most common reasons for physician visits in the United States

U.S. Deaths from Opioids & Heroin: 1999-2014



^{*}Heroin includes opium.

1999-2013 Statistics: CDC/NCHS NVSS Multiple Cause of Death Files.

2014 Statistics: American Society of Addiction Medicine (ASAM). Opioid Addiction: 2016 Facts & Figures.

The Opioid Crisis

Estimated economic burden: \$78.5 billion annually

• 25% of those who are prescribed opioids misuse them

• 5% of those who misuse opioids go on to use heroin

• 80% of those who use heroin, first misused prescription opioids

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ACP Guidelines: Treatment of Low Back Pain Feb 2017

Recommendation 1:

Given that most patients with <u>acute or subacute low back pain</u> improve over time regardless of treatment, clinicians and patients should <u>select nonpharmacologic treatment</u> with superficial <u>heat</u> (moderate-quality evidence), <u>massage</u>, <u>acupuncture</u>, or <u>spinal manipulation</u> (low-quality evidence). If pharmacologic treatment is desired, clinicians and patients should select nonsteroidal anti-inflammatory drugs or skeletal muscle relaxants (moderate-quality evidence). (Grade: strong recommendation)

Recommendation 2:

For patients with <u>chronic low back pain</u>, clinicians and patients should <u>initially select nonpharmacologic treatment</u> with <u>exercise</u>, <u>multidisciplinary rehabilitation</u>, <u>acupuncture</u>, <u>mindfulness-based stress reduction</u> (moderate-quality evidence), <u>tai chi, yoga, motor control exercise</u>, <u>progressive relaxation</u>, <u>electromyography biofeedback</u>, <u>low-level laser therapy</u>, <u>operant therapy</u>, <u>cognitive behavioral therapy</u>, <u>or spinal manipulation</u> (low-quality evidence). (Grade: strong recommendation)

<u>Acupuncture Reduces Pain Medication Prescriptions</u> in adult patients who received acupuncture treatments at a United States Air Force medical center.

Opioid prescriptions decreased by 45%, muscle relaxants by 34%, NSAIDs by 42%, and benzodiazepines by 14%.

"In this military patient population, the number of opioid prescriptions decreased and patients reported improved symptom control, ability to function, and sense of well-being after receiving courses of acupuncture"

Crawford Paul, Penzien Donald B., and Coeytaux Remy. Medical Acupuncture. August 2017, 29(4): 229-231.





Stress: a common factor



Health conditions affected by stress **IBS Anxiety** Pain Heart

Diabetes

Disease

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Weight

Depression

Headache

Weill Cornell Medicine

Can we prevent and relieve stress?



Mindfulness Based Stress Reduction Program

3 Components:

- 1. Educational material
 - Relaxation
 - Meditation, yoga



- Meditation, yoga in group meetings
- Meditation, yoga as homework
- 3. Group processes
 - Barriers to practice and supportive interactions



MBSR vs. Cognitive Behavioral Therapy or Usual Care on Back Pain and Functional Limitations

- 342 Adults, age 20 70 with chronic low back pain
 - Mean age: 49.3
 - Mean duration of back pain: 7.3 years
- Usual Care vs. MBSR vs. CBT
 - Usual care
 - MBSR: Training in mindfulness, meditation, and yoga in 8 weekly 2-hour groups
 - CBT: Training to change pain-related thoughts and behaviors
- Outcomes: Functional limitations + Self-reported back pain
- Reported at 4, 8, 26, 52 weeks

Effect of Mindfulness-Based Stress Reduction vs. Cognitive Behavioral Therapy or Usual Care on Back Pain and Functional Limitations in Adults with Chronic Low Back Pain: A Randomized Clinical Trial, JAMA 2016.

4 weeks 8 weeks

52 weeks

4 weeks

8 weeks

Pain Bothersomeness

Usual Care

MBSR

Percentage (95% CI)

CBT

- 26 weeks 44.1 (35.9, 54.2) 60.5 (52.0, 70.3) 57.7 (49.2, 67.6) 48.6 (40.3, 58.6) 68.6 (60.3, 78.1) 58.8 (50.6, 68.4) 20.6 (14.6, 28.9) 19.1 (13.3, 27.4) 21.7 (15.3, 30.6) 24.7 (18.1, 33.6) 36.1 (28.3, 46.0) 33.8 (26.5, 43.2) 26 weeks 26.6 (19.8, 35.9) 43.6 (35.6, 53.3) 44.9 (36.7, 55.1) 52 weeks 31.0 (23.8, 40.3) 48.5 (40.3, 58.3) 39.6 (31.7, 49.5)
- Weill Cornell Medicine

MBSR vs. Cognitive Behavioral Therapy or Usual Care on Back Pain and Functional Limitations

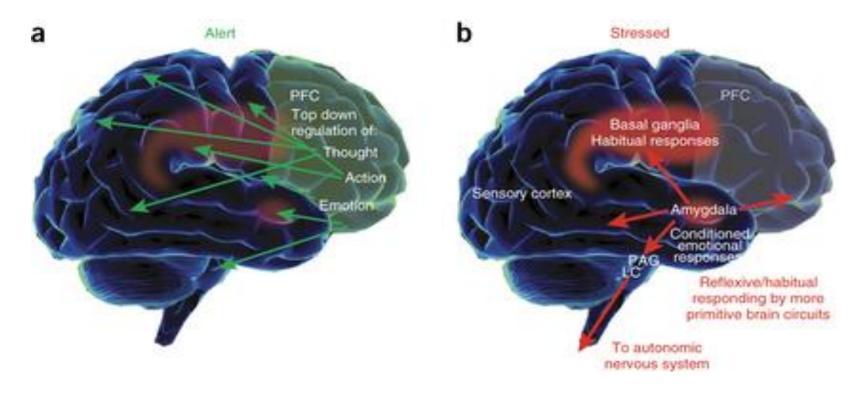
For adults with chronic low back pain, treatment with MBSR or CBT alongside usual care resulted in greater improvement in self-reported back pain and functional limitations at 26 weeks.

Effect of Mindfulness-Based Stress Reduction vs .Cognitive Behavioral Therapy or Usual Care on Back Pain and Functional Limitations in Adults with Chronic Low Back Pain: A Randomized Clinical Trial. JAMA 2016.

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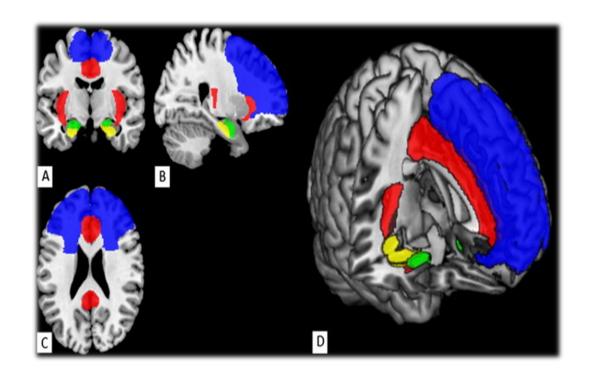
Neurologic Effects of Chronic Stress



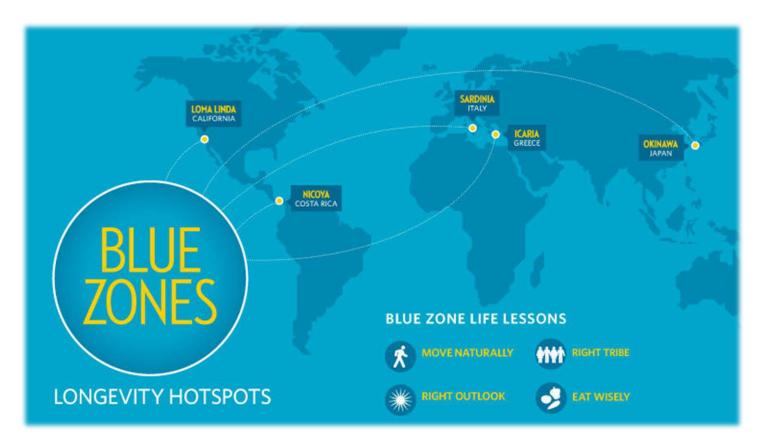
Arnsten, A. Stress weakens prefrontal networks: molecular insults to higher cognition

Effect of MBSR on the Brain

- Activity
- Connectivity
- Volume
- May improve emotion regulation and higher cognitive function
- Clinical effects are long lasting



Blue Zones



Integrative Health and Wellbeing Clinical Team



Oleg Fabrikant, DAOM, LAc Acupuncturist

 Experienced Acupuncturist in General practice, internal medicine, pain management, orthopedics, neurological, musculoskeletal and TMJ disorders, sports and soft tissue injuries and women's health.



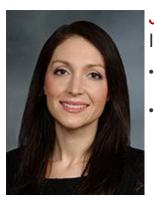
Jacqueline Herbach, LMSW, LMT Massage Therapist & Pilates Instructor

- Certified in Massage Therapy, Pilates, Personal Training, Group Exercise, Yoga, Ericksonian Hypnosis
- Formerly provided private and group Pilates classes, specialized in Orthopedics



Manna Lu-Wong, RN Integrative Health Nurse

- Trained in aromatherapy, contemplative care, yoga, both western and traditional Japanese Reiki, acupuncture
- Helped implement Complementary Care Program at NYP/LM Cancer Center



Jackie Topol, RD, CSO, CDN Integrative Nutritionist

- Board certified specialist in oncology nutrition
- Experienced working with patients with weight management, skin health, food sensitives, chronic fatigue, IBS, heart disease and cancer













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