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EDITORIAL: UPDATE ON IN-CAM MEMBERS

We would like to extend a warm welcome to IN-CAM's new members and provide an update of IN-CAM's over 270 members' backgrounds and experiences so that you can better understand the network to which you belong, and to facilitate introduction to your peers.

IN-CAM members are geographically diverse, represent many different professions and are involved in research spanning the four CIHR pillars.

- Almost 90% of IN-CAM members come from Canada: 13.3% from BC, 24.4% from the prairies, 35.2% from ON, 12.6% from QB and 3.3% from the maritimes. The other 10% of you come from the United States, France, United Kingdom, Australia, Iceland, Italy and India.
- 46% of you have participated in one or more CAM research projects and 27% of you have never participated in CAM research but are interested to get involved. Another 27% of you would not like to participate in research, but are interested in keeping in touch with research in this field.
- Over 20% of you identify yourselves primarily as clinicians (61.8% of which are CAM practitioners), almost 20% as academic researchers, over 10% as educators, 10% as students, 10% as administrators, almost 5% as research staff, another 5% as policy analysts/advisors, and 15% represent other categories including a combination of the above, as well as funders, regulators, librarians and consultants.
- Over 40% of members are involved in clinical research, 30% in health services, systems and policy research, 15% population health research and almost 15% in basic science research.
- Members' top four research interests are CAM therapies in general, integration of CAM and conventional care, NHPs in general and health promotion/wellness/disease prevention.

If you are interested in meeting other IN-CAM members with similar interests to yours, please visit IN-CAM's website at www.incamresearch.ca. IN-CAM's member database is searchable by geographic location, primary profession, CIHR pillar and research interests.

We would like to invite even more people to join IN-CAM and ask that you help us do this by passing on this bulletin to interested colleagues and students.

We recognize the need for our Network members to be able to come together in person to network, share emerging ideas research results, foster new collaborations, and strengthen existing partnerships. **We are therefore very excited to announce our First Annual Symposium "Increasing CAM Research Capacity and Networking in Canada"**. It has been scheduled for December 4-5th, 2004 in Toronto, Ontario. Be sure to put the dates in your calendar! More information on the symposium, as well as the call for abstracts is available on our website. We hope we will see you all there.

Finally, we want to remind you that we envision IN-CAM as a Network built by and for its members. As such, we welcome and encourage your comments and suggestions on how to build a better Network (please see contact information at the end of the bulletin). We also hope that some of you will want to actively get involved in building the Network. We are in need of new members to participate in our 11 subcommittees (awards, bulletin, business planning/sustainability, evaluation, fundraising, membership recruitment, partnership, research capacity, research priorities, symposium and website). Our greatest needs are currently within the fundraising and symposium subcommittees. Please contact us if you are interested in additional information about subcommittee participation. **We really need your help in making IN-CAM the best Network that it can be.**

ÉDITORIAL: MISE À JOUR AUX MEMBRES DE L'IN-CAM

Nous voudrions accueillir chaleureusement les nouveaux membres de l'IN-CAM et nous sommes heureux de vous proposer une mise à jour des formations et expériences des membres IN-CAM, afin que vous puissiez mieux comprendre le réseau auquel vous appartenez et vous faciliter l'introduction auprès de vos collègues.

Les membres IN-CAM sont de régions géographiques diverses, représentent beaucoup de professions différentes et sont investis dans la recherche couvrant les quatre domaines d'IRSC.



ÉDITORIAL: MISE À JOUR AUX MEMBRES DE L'IN-CAM

- Presque 90% des membres IN-CAM viennent du Canada: 13.3% de BC, 24.4% des prairies, 35.2% de ON, 12.6% de QC et 3.3% des maritimes. Les derniers 10% d'entre vous viennent des Etats-Unis, de France, du Royaume-Uni, d'Australie, d'Islande, d'Italie et d'Inde.
- Plus de 20% d'entre vous vous identifiez essentiellement comme praticiens (dont 61.8% sont praticiens de MAC), presque 20% comme chercheurs académiques, plus de 10% comme éducateurs, 10% comme administrateurs, 10% comme étudiants, presque 5% comme membre d'une équipe de recherche, un autre 5% comme conseillers et presque 20% comme appartenant à d'autres catégories inclure une combinaison de ce qui précède, aussi bien que les financiers, gouvernement, les bibliothécaires et les expert-conseils.
- Plus de 40% des membres sont investis dans le recherche clinique, 30% dans les services, l'organisation et le conseil de santé, 15% dans la recherche de santé au niveau des populations et presque 15% dans la recherche scientifique de base.
- Les quatre principaux thèmes de recherche des membres sont les thérapies de MAC en général, intégration des MAC dans les soins conventionnels, produits de santé naturels en général et promotion de la santé – bien-être – prévention des maladies.

Si vous êtes intéressé(e) pour rencontrer d'autres membres de l'IN-CAM ayant les mêmes intérêts que vous, vous pouvez visiter le site web de l'IN-CAM, www.incamresearch.ca. La base de données des membres de l'IN-CAM est consultable par situation géographique, profession principale, domaine d'IRSC et thème de recherche.

Nous aimerions inviter d'autres gens à rejoindre IN-CAM et vous prions de nous y aider en distribuant ce bulletin aux collègues et étudiants intéressés.

Il nous semble nécessaire que les membres du réseau se rassemblent en personne pour prendre contact, partager des idées émergentes et des résultats de recherche, encourager de nouvelles collaborations et renforcer les partenariats existants. **Nous sommes, par conséquent, ravis d'annoncer le Premier Symposium Annuel "Amélioration de la Capacité et du Réseau de Recherche en MAC au Canada"**. Celui-ci a été programmé les 4 & 5 décembre 2004 à Toronto, Ontario. N'oubliez pas de noter le rendez-vous! Des informations supplémentaires à propos du symposium, ainsi que l'appel des propositions de communication est disponible sur notre site web. Nous espérons vous y retrouver.

Enfin, nous vous rappelons que nous envisageons IN-CAM comme un réseau construit par et pour ses membres. Ainsi, nous accueillons et encourageons vos commentaires et suggestions permettant d'améliorer le réseau (vous trouverez nos contacts à la fin du bulletin). Nous espérons aussi que certains d'entre vous voudront s'investir activement dans la construction du réseau. Nous avons besoin de nouveaux membres pour prendre part à nos 11 sous-comités (récompense, bulletin, planning et maintenance de l'entreprise, évaluation, récolte de fonds, marketing et recrutement des adhérents, partenariat, capacité de recherche, priorités de recherche, symposium et site web). Nos besoins les plus importants sont actuellement pour les sous-comités de la récolte de fonds et du symposium. Veuillez nous contacter si vous êtes intéressé(e) par des informations additionnelles concernant la participation aux sous-comités. **Nous avons réellement besoin de votre aide pour faire d'IN-CAM le meilleur réseau qu'il puisse être.**

FOCUS ON: GRADUATE STUDENTS IN CAM RESEARCH

IN-CAM'S (ONLINE) RESOURCES FOR GRADUATE STUDENTS

IN-CAM recognizes the important role that graduate students play in the development of the field of CAM research in Canada. Today's graduate students will be tomorrow's CAM researchers and as such IN-CAM has made it a priority to support their research and education. IN-CAM has a variety of resources available to graduate students, all of which are either directly accessible or further explained on the member portion of our website (www.incamresearch.ca). Resources include:

- Access to research funding. IN-CAM offers Graduate Studentship Grants (**application deadline May 15th** – please see below for additional details) as well as a listing of external funding opportunities specific to graduate students;
- A membership database, which includes a listing of IN-CAM members' research interests and experience. This database will allow you to locate and contact other students involved in CAM research, researchers whom you may look to for mentorship or advice on your thesis or dissertation work, or clinicians for practical input on your research;

- A listing of CAM specific education and training opportunities, as well as online CAM research methods resources;
- A listing of Graduate Student positions and employment. In this section of our website we list Masters or PhD level programs that are available to students studying CAM research, as well as paid employment opportunities to help you gain practical experience – and pay your bills!
- A listing of CAM research conferences, symposia and other events. This list provides suggestions on events where you may present your research to help you gain experience and also meet and network with other students or researchers in your field. A special emphasis will be placed on graduate students during IN-CAM's First Annual Symposium, and students are encouraged to submit research abstracts. More information on the symposium, as well as the call for abstracts is available on our website.

IN-CAM is committed to supporting graduate students studying CAM research in Canada. If you have any questions regarding any of these resources or have suggestions on how IN-CAM may better meet your needs as a graduate student, please let us know by contacting one of our IN-CAM Coordinators (please see contact information at the end of the Bulletin).



CIHR / NHPD CAM ICE NETWORK GRADUATE STUDENTSHIP GRANT

IN-CAM hosts an annual Graduate Studentship Grant program. The goal of this program is to support the development of researchers interested in IN-CAM's research priorities. Some of the grant requirements are:

- The project must be related to complementary & alternative medicine.
- The project must fit within one or more of IN-CAM's priority research areas.
- The student must be enrolled in a research based program leading to a Masters or PhD.
- The student must be supervised by a member of IN-CAM.
- Students who have existing funding from CIHR, SSHRC or NSERC are not eligible for the studentship grant.

Awards are usually worth \$5,000-\$10,000. The deadline for applications is May 15th, 2004. Please see the Research Funding section of the IN-CAM website for the Graduate Studentship Grant guidelines, application criteria and form.

PROFILE: SIL MIOR, DC

I am currently enrolled in a MSc in the Department of Health Policy, Management and Evaluation, Faculty of Medicine, University of Toronto. My applying to this program came about from a journey that has spanned over 20 years and has been influenced by my research interests, mentors and patients. During this time I had the opportunity of participating in numerous research projects and task forces, as well as teaching at the Canadian Memorial Chiropractic. I also became aware of the consequence of working in an insular environment and its potential threat to limiting one's knowledge and experiences of the broader health care system. Clinical practice taught me the inherent limitation of any one profession's ability to manage the complexities of human health and disease. This limitation, if acknowledged, could be addressed through multidisciplinary collaborative practice.

Having first worked with physicians in my residency program in Saskatoon, I learned to appreciate the benefits of collaboration in the delivery of health care services. I found such collaboration was of benefit to patients, as well as providing a fertile ground for research. Later, when a funding opportunity became available to assess the impact of chiropractors collaborating with physicians in Primary Care Reform, I immediately became involved. I was subsequently seconded to the Ontario Ministry of Health and Long Term Care where I was exposed to a world that is foreign to most health care providers, let alone CAM providers. This experience proved invaluable and helped to unfold the complexity of the health care system. It also made me aware of the need to further my education.

I saw our collaboration study as a wonderful opportunity to apply the knowledge that I would gain from graduate work. The first phase of our research was a qualitative analysis of data that explored the challenges and facilitators of collaborative practice from the perspective of content experts, as well as those who would be directly involved in the delivery of health care in a primary care setting. From this analysis, we developed a model of collaboration that

COMPLEMENTARY AND ALTERNATIVE MEDICINE (CAM) IN CANADIAN UNIVERSITY GRADUATE PROGRAMS: A PROGRAM SCAN

One of IN-CAM's main goals is to build research capacity. The first step in this process is to identify current research and training capacity for new CAM researchers in Canada. Describing the baseline is a necessary part of a needs assessment and will provide a "bench-mark" from which to evaluate the success of programs and initiatives designed to increase research capacity. A team of IN-CAM researchers is planning a research project that aims to explore and describe CAM instruction in existing Canadian university graduate programs. This study aims to collect information on where, how, and with what content CAM courses are being taught at the graduate level, as well as personal insights into the importance of CAM in the curriculum. Recruitment of those who teach or are involved in a class with CAM content and are interested in completing this survey will begin late spring 2004. Watch for an upcoming IN-CAM News flash about this project or contact Heather Boon (heather.boon@utoronto.ca) for further information.

Sil Mior, DC

*Canadian Memorial Chiropractic College
Department of Health Policy, Management and
Evaluation, Faculty of Medicine, University of Toronto*



could facilitate interdisciplinary communication and coordination thus, hopefully, improving the continuity and outcomes of patient care. The second phase of our research will see the implementation of the model in select primary care sites in Ontario.

There is considerable mention in government commissioned reports and published scientific papers of the benefits of collaborative practice. In spite of this noted relevance and importance, there have been few successful models of collaboration. This study attempts to advance the knowledge of the challenges facing collaborative practice and the potential facilitators that may contribute to its success in an Ontario primary care setting. Although the results will focus on the relationship between chiropractors and physicians, it is anticipated that they will be generalizable to other health care professions in similar health care delivery settings.

This work is also an example of the benefits of interdisciplinary collaboration in research. I am indebted to my co-investigators Jan Barnsley PhD; Heather Boon PhD; Pierre Cote DC, PhD; Brian Gamble MD; Robert Haig DC; and Fred Ashbury PhD; as well as funding support from the Canadian Memorial Chiropractic College, Ministry of Health and Long Term and Primary Health Care Transition Fund.



MEMBERS RECOGNIZED

CAM RESEARCHER GRANTS

In 2003 **IN-CAM** awarded \$14,768 in research project funding. The award winners were:



Sylvie Dodin

Département d'obstétrique et gynécologie,
Université Laval

Co-investigator(s): Alain Baribeault, Claudine Blanchet
and Réal Goborjault

Project Title: Massage and carpal tunnel syndrome in
women



Pierre Haddad

Département de Pharmacologie, Faculté de Médecine,
Université de Montréal

Co-investigator(s): Marie J.Lachance

Project Title: Les jeunes et les aliments de santé
naturels



Marja Verhoef,

Department of Community Health Sciences,
Faculty of Medicine, University of Calgary

Co-investigator(s): Heather Boon and Margaret White

Project Title: What do cancer patients perceive to be
the benefits of Complementary and Alternative
Therapies

The Hospital for Sick Children Foundation

The HSCF awarded 3 of its 5 Complementary and Alternative
Health Care & Paediatrics 2003 Research Grants to the following
IN-CAM members:

Dr. Heather Boon, University of Toronto

Evidence-Based Reviews of the Safety and Efficacy of Natural
Health Products for Children and Expecting Mothers

Dr. Tammy Clifford, Children's Hospital for Eastern Ontario

Complementary & Alternative Medicine: A Survey of its Use by
Children & Youth in the National Capital Region

Dr. Ron D. Goldman, The Hospital for Sick Children

Complementary and Alternative Medicine in the Pediatric
Emergency Department

The other two grants were awarded to:

Ms. Alison James, Queen's University

Utilization of Alternative and Complementary Medicine among
Canadian Youth

Dr. Liana Urichuk & Dr. Lola Baydala, Child and Adolescent
Services Association (CASA)

Feasibility Study for a Controlled, Randomized Trial Comparing
Ritalin and Neurofeedback Therapy in the Management of
Attention Deficit Hyperactivity Disorder

Canadian Institutes of Health Research

CIHR awarded a CAM relevant Open Grant in its September 2003
competition.

Principal Investigator: Balneaves, Lynda G, University of British
Columbia

Co-investigators: Davison, B Joyce; O'Brien, Robin K; Truant, Tracy L;
Verhoef, Marja

Project: Information needs of breast and prostate cancer patients and
their family members in the context of complementary therapy
decision-making processes

RESEARCHER PRESENTATIONS

IN-CAM had a significant presence at the **NHP Research Conference**
recently held in Montreal. We hosted a social sciences, health services
and policy breakfast at the conference to welcome, meet and network
with IN-CAM members as well as invite new members into the
network. It was a successful networking event and we'd like to thank
the 40 people that joined us. IN-CAM's members (as of February 20th)
chaired 5 of the 13 conference sessions and presented many papers
including:

Boon, Heather—Building the Canadian Interdisciplinary Network for
Complementary and Alternative Medicine Research

Burford-Mason, Aileen—Confounding Factors in the Design and
Interpretation of Clinical Trials of Vitamins

Dodin, Sylvie—Flaxseed diet supplementation to relieve menopause
symptoms: a one year placebo-controlled double-blind randomized
clinical trial

Dupasquier, Chantal—Limits to the beneficial effects of dietary
flaxseed in hypercholesterolemic rabbits

Hirschhorn, Kristine—Herbal Medicine—Product, Modality, or
Profession? Emergent Issues in Canadian Health Policy

Jurgens, Tannis—A Pilot Study to Evaluate the Utility of a New Tool for
the Critical Appraisal of Randomized Controlled Trials of NHPs

Leis, Anne—Use of Natural Health Products by Canadian Cancer
Patients

Marotta, Francesco—Integrating Phytotherapy and Modern Science at
the University of Milan

Marotta, Francesco—Effect of a novel phytotherapeutic on DNA
synthesis and liver enzyme release in experimental liver damage

Sivojelezova, Anna—The Motherisk Program: Natural Health Product
Use in Pregnancy

Verhoef, Marja—Natural Health Products in Undergraduate Medical
Education: A Workshop Report

Vohra, Sunita—Integrative Research and Education Program at an
Academic Centre: The CARE Program at the University of Alberta.

**For a listing of available CAM specific funding opportunities, visit the Research Funding
section of IN-CAM's web site:**

www.incamresearch.ca



OF INTEREST

NEW PARTNERSHIP

We would like to welcome the **Complementary and Alternative Medicine Education and Research Network of Alberta** (CAMera) as the first partner of IN-CAM. The mission of CAMera is to sustain an education and research network to:

- Advance evidence based integrative health care practice,
- Facilitate multidisciplinary research, and
- Promote CAM education.

The purpose of this partnership is to contribute to the sustainability, stability and efficiency of both networks through the sharing of information and resources, and thus to avoid the duplication of effort. For more information on CAMera please see the Network website: www.cameraresearchnetwork.ab.ca

RESEARCH SHOWCASE

Perceived role of scientific evidence in the decision to continue use of complementary therapies by Canadians with inflammatory bowel disease

Patients with inflammatory bowel disease (IBD) commonly use complementary therapies (CTs). Little is known, however, about how IBD patients evaluate CTs and use scientific or other evidence to make decisions about CT use. Researchers at the University of Calgary undertook an exploratory study to begin looking at these questions. The study was a secondary analysis of data collected through a mail survey of CT use by people with IBD, conducted in 2001. One survey question asked: "If a scientific report came out saying that one of the [CT] therapies you currently use does not work, would you stop using that therapy?" Of the 514 people currently using CTs for their IBD, 65% (n=334) responded that they would continue to use a CT despite negative scientific evidence. This result prompted us to explore factors related to IBD patients' use of scientific evidence in the decision to continue CT use. For simplicity, in the following discussion we refer to those who would "reject" or "accept" scientific evidence. Factors related to rejecting scientific evidence included:

- **Perceived improvement of symptoms and benefits of CT use** - Participants who reported an improvement of common symptoms (energy level, nutritional status, side effects of conventional medicine, sense of well being, stress level, sense of control over disease and IBD symptoms) were more likely to reject scientific evidence. Further, those who believed CT use allowed them to stop (yes/no) ($p < 0.0001$) or decrease the dose of conventional IBD medications (yes/no) ($p < 0.0001$), or who believed CTs cured their IBD (yes/no) ($p = 0.004$) were more likely to reject scientific evidence. Participants who believed CT use was a waste of their money (yes/no) were more likely to accept scientific evidence ($p = 0.0005$).
- **Desired role in treatment decisions** - As participants' desired role in treatment decisions increased, they were more likely to reject scientific evidence ($p = 0.037$)

The study suggests that patients base their decisions to continue or discontinue CT use on more than scientific evidence alone. Patients likely also consider their personal experiences with CTs, the perceived benefit from CT use, and the cost of CTs when making the decision to continue or discontinue CT use. The study also suggests

that patients who desire a larger role in their IBD treatment would continue CT use, paralleling other study findings demonstrating that CT users are more health conscious and believe more strongly that people can influence their own state of health. As this study was exploratory in nature, further studies need to focus specifically on the use of scientific and other evidence in the IBD population to understand how patients make decisions to use both CTs and conventional therapies.

Laura Vanderheyden BSc¹, Marja J Verhoef PhD^{1,2}, Robert J Hilsden MD PhD^{1,2}

¹ Department of Community Health Sciences, University of Calgary

² Department of Medicine, University of Calgary

RECENT ARTICLES

- Aickin M. Participant-centered analysis in complementary and alternative medicine comparative trials. J Altern Complement Med. 2003 Dec;9(6):949-57.
- Barrett B, Marchand L, Scheder J, Plane MB, Maberry R, Appelbaum D, Raket D, Rabago D. Themes of holism, empowerment, access, and legitimacy define complementary, alternative, and integrative medicine in relation to conventional biomedicine. J Altern Complement Med. 2003 Dec;9(6):937-47.
- Bell IR, Cunningham V, Caspi O, Meek P, Ferro L. Development and validation of a new global well-being outcomes rating scale for integrative medicine research. BMC Complement Altern Med. 2004 Jan 15;4(1):1.
- Berman JD, Straus SE. Implementing a research agenda for complementary and alternative medicine. Annu Rev Med. 2004;55:239-54.
- Ernst E. Patient choice and complementary medicine. J R Soc Med. 2004 Jan;97(1):41.
- Gillett G. Clinical medicine and the quest for certainty. Soc Sci Med. 2004 Feb;58(4):727-38..
- Lie DA, Boker J. The CAM health belief questionnaire (CHBQ): Development and validation of a short survey instrument for use in medical education settings. BMC Med Educ. 2004 Jan 12
- Makowski SK. Assessing local market and organizational readiness for the integration of complementary and alternative medicine into ambulatory care centers. J Ambul Care Manage. 2004 Jan-Mar;27(1):4-11.
- Miller FG, Emanuel EJ, Rosenstein DL, Straus SE. Ethical issues concerning research in complementary and alternative medicine. JAMA. 2004 Feb 4;291(5):599-604.
- Rodeheaver PF, Taylor AG, Lyon DE. Incorporating patients' perspectives in complementary and alternative medicine clinical trial design. J Altern Complement Med. 2003 Dec;9(6):959-67.
- Smith WB. Research methodology: implications for CAM pain research. Clin J Pain. 2004 Jan-Feb;20(1):3-7.

OTHER PUBLICATIONS

The **Canadian Health Network** (CHN: www.canadian-health-network.ca) has recently published a glossary of terms associated with the field of complementary and alternative medicine. It includes definitions of diverse health care practices, including manual and energetic therapies, as well as substances, also known as Natural Health Products, and research terminology. The glossary was initially created in 2000 to support a series of Frequently Asked Questions about complementary and alternative health care. The glossary may be found at: www.cameraresearchnetwork.ab.ca/chn/eng gloss



UPCOMING EVENTS

First Annual IN-CAM Symposium

IN-CAM is hosting its First Annual Symposium on December 4-5th, 2004 in Toronto, Ontario. The symposium theme is 'Increasing CAM research capacity and networking in Canada'. Please see the IN-CAM website (www.incamresearch.ca) for more information on the symposium (e.g. keynote speakers) and the call for abstracts. The deadline for abstract submissions is June 30, 2004.

Strategies for Building Research Capacity: Health Research Methods 2004

April 29 - 30, 2004

Calgary, Alberta

This course aims to provide opportunities to acquire the skills and knowledge required to tackle the challenges involved in integrating research into practice. Keynote speakers will frame each day of workshops. This year's workshops will provide opportunities to expand research skills, and also to examine issues involved in moving research findings into practice. All of the sessions encourage the participation of health researchers and practitioners.

The course brochure (with registration form) is available at: www.cme.ucalgary.ca/courses/8100143.html. For further information, please contact Marjorie Olsen: molsen@ucalgary.ca (403) 220 4251.

Developing Research Strategies

May 14, 2004

Hotel Ibis, Southampton UK

A joint conference with the University of Southampton CAM Research Unit and the Research Council for Complementary Medicine. Sponsored by Elsevier, (publishers of Complementary Therapies in Medicine) and the Research Council for Complementary Medicine. This Conference is aimed at individuals and research groups who are interested in the development of complementary and alternative medicine research. For further information please contact Jane Cousins (jc2@soton.ac.uk), or download the conference brochure from the IN-CAM website.

Spirituality and Health—3rd North American Multidisciplinary Conference

May 27-29, 2004

Calgary, AB

The course brochure (with registration form) is available at: www.cme.ucalgary.ca/courses/8100343.html. For further information, please contact: Andrea Kinloch, kinloch@ucalgary.ca (403) 220 3988.

3rd Annual CAMera Research Symposium: Building Research Literacy and Capacity - Expanding Horizons

June 19, 2004

University of Calgary, Calgary AB

Abstracts are due May 7, 2004. The call for abstracts can be downloaded from CAMera's website. For further information, please visit www.cameraresearchnetwork.ab.ca, or contact Lana Trojan, CAMera Network Coordinator.

Diversity and Debate in Alternative and Complementary Medicine: An Academic and Experiential Conference for Researchers and Practitioners

July 1-2, 2004

Nottingham University, United Kingdom

This conference will provide a forum for those interested or involved in Alternative Medicine to stimulate debate on diverse & innovative research approaches relevant to alternative health theory and practice. There will be opportunities to present, explore, develop and learn about the diversity of potential research methods and theoretical approaches and their application to alternative medicines. For more information and to view the call for abstracts please visit the IN-CAM website. Abstracts are due March 15, 2004.

Society for Integrative Oncology: 1st International Conference

November 17 - 19, 2004

New York City, New York USA

To download the conference brochure, including information on abstract submission, please visit the IN-CAM website or www.integrativeonc.com. Abstracts may be submitted from March 1st through June 1st, 2004.

For more events related to CAM research and research methods, please visit the events page of IN-CAM's website www.incamresearch.ca

CONTACT US /

N'HÉSITÉZ PAS À NOUS CONTACTER

We invite your questions, comments and suggestions on the bulletin, the website and the network in general. Please contact one of our two Network Coordinators:

Nous accueillerons avec plaisir vos questions, commentaires et suggestions à propos du Bulletin, du site Web ou du réseau en général. Veuillez contacter l'une de nos deux coordonnatrices:

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