



## EDITORIAL: IN-CAM'S RESEARCH PRIORITY AREAS

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Thanks to everyone who participated in IN-CAM's research priority setting process. Based on your feedback, the Network's research priority areas have been defined as follows.

### Methods to Study the Safety, Efficacy, and Effectiveness of CAM

This research area includes exploration of how different methods (e.g., randomized controlled trials, n of 1 trials, observations studies, qualitative research, adverse effects monitoring) can best be used to study the safety, efficacy and effectiveness of CAM products and therapies. This may involve modifying these methodological approaches and ensuring that the designs chosen are used rigorously and in a manner that respects the philosophical underpinnings of the CAM product or therapy being investigated (i.e., model validity). An important part of this research is the identification of appropriate outcomes for studying the effects of CAM interventions.

### Defining CAM

This research area includes exploring the defining characteristics of CAM, whether CAM is a profession or a modality, how the definition of CAM evolves over time, the reasons why different groups define or do not define themselves (or others) as part of CAM, and efforts to develop a widely-accepted definition of CAM to allow for more comparative research.

### CAM Health Care Delivery and Policy

This research area includes a variety of health services research topic areas including: who is practicing CAM; access to CAM; payment for and the economics of CAM (e.g., cost-effectiveness studies); models of CAM care provision (e.g., integrative health care); relationship of CAM and public health; and inter-professional relations. The position of CAM within the Canadian health care system and CAM policy decisions (e.g., regulation of Natural Health Products and CAM providers, insurance/government policies on reimbursement, intellectual property rights) are also included, as are studies of the evolution and professionalization of CAM practitioner groups.

### CAM Use

This research area includes investigation of patterns of CAM use (e.g., who is using CAM and why). Investigation of factors that predict or explain CAM use and how CAM use changes over time in an individual or specific population group would also fit into this priority area. Exploration of theories and explanatory frameworks from a variety of disciplines (including sociology, economics, anthropology, political science, psychology, nursing, history, etc.) that assist in explaining CAM use is also included.

### Knowledge Transfer

This research area includes studies of how CAM practitioners are educated and trained, in particular in terms of research literacy and capacity. It also includes studies of inter-professional education, including what conventional health care practitioners are being taught about CAM. Research on how best to provide information to practitioners and consumers to increase informed decision-making about CAM would also fall into this area.

When appropriate and where possible, research in these priority areas should be theoretically based, interdisciplinary and comparative, and should use scientifically valid and philosophically appropriate methods.

When we asked you to rank the Network's research priority areas, many of you told us that it was difficult to do so as you considered each as an important area for the Network. The analysis of your rankings reinforced this point and therefore our Advisory Committee has recommended that the Network look for ways to support research in each of the identified priority areas. Future IN-CAM funding competition decisions will be guided by the identified research priorities.

## ÉDITORIAL: LES DOMAINES DE PRIORITÉS DE RECHERCHE D'IN-CAM

Merci à tous ceux qui ont participé au processus de mise en place des priorités de recherche IN-CAM. Sur la base de vos réponses, les domaines de priorités de

recherche du Réseau ont été définis comme suit. Veuillez noter que la traduction en français des domaines de priorités doit encore être finalisée.



## ÉDITORIAL: LES DOMAINES DE PRIORITÉS DE RECHERCHE D'IN-CAM

### Étude de la Sécurité, l'Efficacité et la Portée des MAC

Ce domaine de recherche inclut la découverte de la manière dont les différentes méthodes (par ex. les expériences gérées aléatoirement, les expériences "n de 1", les études d'observation, la recherche qualitative, la suivi des effets défavorables) peuvent être utilisées au mieux pour étudier la sécurité, l'efficacité et la portée des produits et thérapies de MAC. Ceci peut impliquer de modifier ces approches méthodologiques et de s'assurer que les modèles choisis sont utilisés rigoureusement et dans le respect des fondements philosophiques du produit ou de la thérapie de MAC en cours d'investigation (par ex. validation du modèle). Une part importante de cette recherche est l'identification des résultats appropriés pour étudier les effets des interventions de MAC.

### Définition des MAC

Ce domaine de recherche inclut la découverte des caractéristiques de définition des MAC, si les MAC sont une profession ou une modalité, la manière dont la définition des MAC évolue à travers le temps, les raisons pour lesquelles différents groupes se définissent ou non (eux-mêmes ou les autres) comme faisant partie des MAC et les efforts pour développer une définition largement acceptée des MAC permettant d'accroître la recherche comparative.

### Dispense des Soins et Conseil en MAC

Ce domaine de recherche inclut une variété de sujets de recherche dans les services de soins incluant : qui pratique les MAC, l'accès aux MAC, le paiement et l'économie des MAC (exemples d'études de rentabilité), les modèles d'approvisionnement des soins de MAC (par ex. les soins intégrés), relations entre les MAC et la santé publique, et les relations inter-professionnelles. La position des MAC dans le système de soins Canadiens et les décisions politiques des MAC (par ex. législation des produits de santé naturels et fournisseur de MAC, politiques de remboursement des assurances / du gouvernement et droits à la propriété intellectuelle) sont aussi incluses, comme le sont les études de l'évolution et de la professionnalisation des groupes de praticiens en MAC.

### Usage des MAC

Ce domaine de recherche inclut l'investigation des habitudes d'usage des MAC (par ex. qui utilise MAC et pourquoi). L'investigation des facteurs qui prédisent ou expliquent l'usage des MAC et comment cet usage change au fil du temps, chez un individu ou dans un groupe de population spécifique, pourrait aussi correspondre à ce domaine de recherche. Est aussi incluse la découverte des théories et des structures explicatives d'une variété de disciplines (incluant sociologie, économie, anthropologie, science politique, psychologie, infirmerie, histoire, etc.) qui aide à expliquer l'usage des MAC.

### Transfert de Connaissances

Ce domaine de recherche inclut les études sur l'éducation et la formation des praticiens de MAC, en particulier en termes de niveau et de capacité de recherche. Ceci inclut aussi les études sur l'éducation inter-professionnelle, comprenant ce que les praticiens conventionnels ont appris à propos des MAC. Dans ce domaine on trouverait aussi la recherche sur la meilleure manière de fournir les informations aux praticiens et aux consommateurs pour augmenter les prises de décisions éclairées.

Quand cela est approprié et possible, la recherche dans ces domaines de priorités doit être interdisciplinaire, comparative et basée sur la théorie. Elle doit aussi utiliser des méthodes scientifiquement valides et philosophiquement appropriées.

Quand nous vous avons demandé de classer les domaines de priorités de recherche du Réseau, nombre d'entre vous avez jugé cela difficile à faire, puisque vous considérez chacun comme un domaine important pour le Réseau. L'analyse du classement renforce ce point et, par conséquent, notre Comité de Conseil a recommandé que le Réseau cherche des moyens de supporter la recherche dans chacun des domaines de priorités identifiés. Les décisions à propos des financements futurs d'IN-CAM seront fondées sur les priorités de recherche identifiées.

## FOCUS ON: FIRST ANNUAL IN-CAM SYMPOSIUM

IN-CAM will host its first annual symposium '**Increasing CAM Research Capacity and Networking in Canada**' on December 4-5<sup>th</sup>, 2004 in Toronto, Ontario.

The focus of the symposium will be on networking, interaction and idea generation around interdisciplinary complementary and alternative medicine (CAM) research, with the specific objectives to:

1. Enhance networking among Canadians interested in CAM research (including researchers, students, health care practitioners and policy makers);
2. Facilitate high-quality, interdisciplinary, collaborative CAM research;
3. Involve IN-CAM members in building the network so that it meets their needs; and
4. Celebrate the launch of IN-CAM.

Keynote speakers include:

- Iris Bell MD, PhD  
Program in Integrative Medicine, University of Arizona  
*Beyond Clinical Trials: Innovation and Rigor in CAM Research*
- Pierre Haddad PhD  
Département de Pharmacologie, Faculté de Médecine, Université de Montréal  
*Joining Forces Against a Common Enemy: Bridging Traditional Knowledge and Modern Science by Developing Ethical Phytomedicines Against Diabetes*
- Merrijoy Kelner PhD  
Institute for Human Development, Life Course and Aging, University of Toronto  
*From the Margin to the Mainstream: The Professionalization of CAM Practitioners*



- Adrian Sandler MD  
Olsen Huff Center for Child Development, Thoms Rehabilitation Hospital, University of North Carolina  
*CAM in Developmental Disorders and the Power of the Placebo*

Networking will be facilitated through a series of interactive workshops. Research presentations in the form of both posters and oral presentations will highlight recently completed or ongoing CAM research in Canada.

We welcome workshop proposals related to networking, research literacy and capacity building, mentoring, research methodology relevant to CAM, integrative health care, and other topics that are likely to be of interest to our Network members. Even if you have

only a general idea for a workshop please let us know and we can work together to develop something to meet your needs.

We also welcome abstracts for oral presentations and posters on research related to IN-CAM's priorities. If you are a graduate student and only have preliminary results we encourage you to submit an abstract to share your ideas and results.

**The deadline for abstract submissions has been pushed back from June 30<sup>th</sup> to July 31<sup>st</sup>, 2004.** Further information and instructions on abstract submission are available on the IN-CAM website ([www.incamresearch.ca](http://www.incamresearch.ca)). If you have any questions or concerns, please contact IN-CAM Coordinator Laura Vanderheyden ([Laura@incamresearch.ca](mailto:Laura@incamresearch.ca)).

## PROFILE: IN-CAM SYMPOSIUM KEYNOTE SPEAKERS

We are pleased that four interesting and accomplished researchers have agreed to be keynote speakers at our inaugural symposium. We have briefly profiled each of them below to give you a better sense of who they are.



**Iris R. Bell, MD PhD** received her AB in Biology magna cum laude from Harvard University, and her MD and PhD in Neuro- and Biobehavioral Sciences from Stanford University. She completed her Psychiatry internship and residency at the University of California-San Francisco and is a Board-certified psychiatrist with Added Qualification in Geriatric Psychiatry. Dr. Bell is a fellow

of the American College of Nutrition, certified in biofeedback by the Biofeedback Certification Institute of America, and licensed as a homeopathic physician in the state of Arizona. She served on faculties at the University of California-San Francisco and Harvard University, pursuing research on environmental medicine in multiple chemical sensitivity and on B vitamin factors in cognitive disorders of the elderly prior to joining the faculty at the University of Arizona College of Medicine in 1990.

Dr. Bell is currently Professor of Psychiatry, Psychology, Medicine, Family and Community Medicine, Surgery, and Public Health at the University of Arizona Health Sciences Center. She is Director of Research for the Program in Integrative Medicine and directs an NIH-funded T32 predoctoral and postdoctoral institutional training grant program on complementary and alternative medicine research at the University of Arizona. The T32 program includes emphasis on rigorous application of appropriate methodologies for the study of various CAM modalities and integrative packages of care.

In addition to over 150 national and international presentations at previous scientific conferences, Dr. Bell participates in the research faculty at the Southwest College of Naturopathic Medicine and the teaching faculty at the Desert Institute School of Classical Homeopathy in Phoenix, Arizona. Dr. Bell has published over 100 peer-reviewed articles, numerous book chapters, and a monograph on environmental chemical sensitivity. Her empirical research focuses on time-dependent neural sensitization in illness from low levels of

environmental chemicals and foods as well as on electroencephalographic and electrocardiographic biomarkers of nonlinear complex system effects of homeopathic medicines. Her theoretical work examines the role of network models for healing from chronic disease.



**Pierre S. Haddad** obtained his PhD degree in Pharmacology from the Université de Montréal in 1986. He carried out two post-doctoral fellowships at the Institute for General and Experimental Pathology of the University of Vienna, Austria, and at the Liver Study Unit of the Yale University School of Medicine in New Haven, Connecticut, respectively. In 1990, he joined the Department of Pharmacology at the Université de Montréal, where he has since carried out his independent research. Dr. Haddad is now a tenured Full Professor and a National Research Scientist of the Quebec Health Research Fund (FRSQ), who have supported him uninterruptedly since 1990, as has the Medical Research Council of Canada (now the Canadian Institutes of Health Research - CIHR).

Dr. Haddad's major interests have long dealt with cellular and molecular mechanisms underlying 1) cold ischemia-warm reperfusion injury of the liver as it happens after transplantation and 2) the action of insulin on liver cells. It is while attending a clinical pharmacology meeting in Marrakech, Morocco, in 1998 that Dr. Haddad became interested in medicinal plants, particularly those claimed to be anti-diabetic. He rapidly initiated collaborative studies on plants reputed to have anti-diabetic potential as determined by an ethnopharmacological survey of the recommendations of traditional practitioners in Morocco and Canada. Using *in vitro* bio-assays of insulin secretion and action, as well as animal models of insulin resistance/diabetes, he began probing the biological activities of the plants with funds from the Quebec and Canadian Diabetes Associations. Studies uncovered interesting insulin-sensitizing and insulinotropic activities, which are being confirmed in *in vivo* animal models.

Dr. Haddad also became aware of the high prevalence of diabetes among the aboriginal populations and of the limitations of conventional medical treatment in that context. He therefore brought together a botanist, a phytochemist, a nutritionist, a diabetes physiolo-



gist and a representative of the Cree Board of Health and Social Services to form a CIHR New Emerging Team that was awarded a 3-year grant from the Institute of Aboriginal Peoples' Health and Health Canada's Natural Health Product Directorate (NHPD) in 2003.

In parallel to these scientific endeavours, Dr. Haddad was solicited by Health Canada to participate in discussions concerning research priorities by the NHPD. There, he met other top Canadian scientists active in NHP research and became a founding member and Vice-president of the NHP Research Society of Canada, established in the fall of 2003.



**Merrijoy Kelner**, PhD, is a medical sociologist at the University of Toronto. She is currently Professor Emerita at the Institute of Human Development, Life Course and Aging. In the late 1970s, she was the principal investigator for a national study of the chiropractic profession. The results were published in *Chiropractors: Do They Help?* (Kelner, Hall and Coulter, 1980). She was co-founder of the first international symposium of social scientists conducting research on complementary and alternative medicine.

More recently she has been engaged in a long-term program of research and scholarly endeavours on complementary and alternative medicine, supported for over ten years by the Social Science and Humanities Research Council. The results of this work have been published in numerous articles and have been presented at conferences in Canada, the United States and England. She has co-edited a book entitled *Complementary and Alternative Medicine: Challenge and Change*, which includes articles by social scientists in a number of countries and is the first collection of its kind.

In 1998, Professor Kelner was appointed to the Health Canada Advisory Group on Complementary and Alternative Health Care. She served as a member of this federal committee for three years. She has recently been appointed as an International Board Member of the Research Council for Complementary Medicine in the United Kingdom. In 2000, Professor Kelner was awarded an honorary doctorate in Naturopathic Philosophy by the Canadian College of Naturopathic Medicine. She currently sits on the board of the Artists' Health Centre Foundation, which oversees an integrated health clinic for professional artists at the Toronto Western

Hospital, and is a member of the Honourary Editorial Board of the journal *Evidence-Based Integrative Medicine*. She and her research associates have just been awarded another three year grant to continue their work on the professionalization of CAM occupations and their future place in the Canadian health care system.



**Dr. Adrian Sandler** is Medical Director, Olson Huff Center for Child Development, at Mission Children's Hospital in Asheville, North Carolina. He is a Clinical Associate Professor of Pediatrics at the University of North Carolina.

A native of Zimbabwe, Dr. Sandler was educated at the University of Cambridge, England, where he earned his undergraduate degrees and then his medical degree in 1982. He did his Pediatrics residency training at Duke University Medical Center, and then completed a three-year fellowship in Developmental-Behavioral Pediatrics with Dr. Mel Levine at UNC Chapel Hill. Dr. Sandler was a full-time academic staff member in the Department of Pediatrics from 1990 through 1994. During that time, he served as Director of Pediatric Rehabilitation, providing leadership in the multidisciplinary clinics serving children with spina bifida and other disorders. Since September 1994, he has been the director of a busy regional multi-disciplinary center for children with disabilities, where his responsibilities have been largely in program development and service provision. He continues to teach residents and students.

Dr. Sandler's research interests have included attention deficit disorder, learning disabilities, spina bifida, megalencephaly, autism and Complementary and Alternative Medicine (CAM). He and his team published the first clinical trial of secretin in autism. Recent academic interests have included functional outcomes and quality of care for children with special needs. He is currently engaged in NIH-funded research on placebo effects. He has published several peer-reviewed studies, and authored a book entitled *Living with Spina Bifida* (UNC Press).

Dr. Sandler is very active in the American Academy of Pediatrics, chairing the national Committee on Children with Disabilities, serving on the Task Force on CAM, and testifying before the White House Commission on CAM. He is a member of a number of professional societies, including the Society for Developmental and Behavioral Pediatrics, the American Academy of Cerebral Palsy and Developmental Medicine, and the Society for Research in Hydrocephalus and Spina Bifida. He has been an invited speaker and faculty member at AAP meetings and at many other national and international conferences.

## CAM RESEARCH UPDATE

### RECENT ARTICLES

- Barnes PM, Powell-Griner E, McFann K, Nahin RL. Complementary and alternative medicine use among adults: United States, 2002. *Adv Data*. 2004 May 27;(343):1-19. Note that this publication is available online at: [nccam.nih.gov/news/camsurvey](http://nccam.nih.gov/news/camsurvey).
- Foote-Ardah CE. Sociocultural barriers to the use of comple-

mentary and alternative medicine for HIV. *Qual Health Res*. 2004 May;14(5):593-611.

- Kligler B, Maizes V, Schachter S, Park CM, Gaudet T, Benn R, Lee R, Remen RN; Education Working Group, Consortium of Academic Health Centers for Integrative Medicine. Core competencies in integrative medicine for medical school curricula: a proposal. *Acad Med*. 2004 Jun;79(6):521-31.



- O'Beirne M, Verhoef M, Paluck E, Herbert C. Complementary therapy use by cancer patients: Physicians' perceptions, attitudes, and ideas. Can Fam Physician 2004 Jun;50:882-888.
- Sarnat RL, Winterstein J. Clinical and cost outcomes of an integrative medicine IPA. J Manipulative Physiol Ther. 2004 Jun;27(5):336-47.
- Shuval JT, Mizrahi N. Changing boundaries: modes of coexistence of alternative and biomedicine. Qual Health Res. 2004 May;14(5):675-90.
- Simon GE, Cherkov DC, Sherman KJ, Eisenberg DM, Deyo RA, Davis RB. Mental health visits to complementary and alternative medicine providers. Gen Hosp Psychiatry. 2004 May-Jun;26(3):171-7.
- Turner PK. Mainstreaming alternative medicine: doing midwifery at the intersection. Qual Health Res. 2004 May;14(5):644-62.
- Verhoef M, Boon H, Brundin-Mather R, Epstein M, Jones A. Complementary and alternative medicine in undergraduate medical education: Associate deans' perspectives. Can Fam Physician 2004 Jun;50:847-849.
- Willison KD, Andrews GJ. Complementary medicine and older people: past research and future directions. Complement Ther Nurs Midwifery. 2004 May;10(2):80-91.
- Zick SM, Benn R. Bridging CAM practice and research: teaching CAM practitioners about research methodology. Altern Ther Health Med. 2004 May-Jun;10(3):50-6.

## OTHER PUBLICATIONS

### NCCAM Summer Newsletter Online

The Summer 2004 issue of *CAM at the NIH* newsletter is now online (<http://nccam.nih.gov/news/newsletter/index.htm>). This issue features CAM use in the United States.

### FDA Guidance on Botanical Drug Products Available

The FDA announced the availability of a guidance for industry entitled '*Botanical Drug Products*'. The guidance is intended to encourage clinical study and submission for marketing approval of botanical drug products. Information on how to request the guidance and/or comment on it is available at: <http://www.fda.gov/OHRMS/DOCKETS/98fr/00d-1392-nad0002.pdf>.

## OF INTEREST

### UPCOMING EVENTS

#### Challenges and Benefits of Integrative Medicine: 1st Annual Conference - Aug 15-17, 2004 - Maui, Hawaii

For more information visit [www.healthquesttravel.com](http://www.healthquesttravel.com), or contact Barbara Howard: [barbara@mindbodytravel.com](mailto:barbara@mindbodytravel.com).

#### Fourth Congress of EuroTCM - Oct 1-3, 2004 - Prague, Czech Republic

For more information about EuroTCM visit: [www.eurotcm.com](http://www.eurotcm.com). For more information about the conference visit: [www.eurotcm.cz](http://www.eurotcm.cz).

#### Complementary and Alternative Medicines: Toward Integrated Health Care - Oct 14-15, 2004 - Queensland, Australia

For more information email [admin@archi.net.au](mailto:admin@archi.net.au).

#### 2nd Biennial Symposium of Integrative Medicine Professionals in the Land of Enchantment: A State of the Art Symposium on Integrative Medicine - Oct 14-17, 2004 - Albuquerque, New Mexico

For more information, see the symposium brochure available at [www.incamresearch.ca/events/pdf/SIMPLE.pdf](http://www.incamresearch.ca/events/pdf/SIMPLE.pdf).

#### 11th Annual Symposium on Complementary Health Care - Nov 17-19, 2004 - Exeter, United Kingdom

The deadline for abstract submission is July 30, 2004. Abstract guidelines may be found on the symposium website ([www.exeter.ac.uk/FACT/sympo](http://www.exeter.ac.uk/FACT/sympo)) or in the information package available at: [www.incamresearch.ca/events/pdf/CAHInfo.pdf](http://www.incamresearch.ca/events/pdf/CAHInfo.pdf).

#### First Forum in Complementary and Alternative Health Care and Paediatrics: Hospital for Sick Children Foundation - Dec 3, 2004 - University of Toronto, Toronto, Ontario

Visit [www.sickkids.ca/foundation](http://www.sickkids.ca/foundation) to view the call for abstracts. Attendance will be free of charge, though participants are asked to register online in advance. For more information, or to get on the mailing list, please contact [national.grants@sickkids.ca](mailto:national.grants@sickkids.ca).

#### Second Annual Conference on Spirituality and Mental Health - Dec 6-7, 2004 - University of Ottawa, Ottawa, Ontario

For more information, contact Carmen Lefebvre at: [clfebvr@rohcg.on.ca](mailto:clfebvr@rohcg.on.ca).

#### 11th Annual World Congress of Music Therapy - Music Therapy: From Lullaby to Lament - July 19-23, 2005 - Queensland, Australia

The deadline for submitting proposals for papers and workshops is July 23, 2004. For further information, visit the website: [www.musictherapy2005.com](http://www.musictherapy2005.com)

For more events related to CAM research, please visit the events page of IN-CAM's website [www.incamresearch.ca](http://www.incamresearch.ca).

## CONTACT US /

## N'HÉSITEZ 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:

#### Laura Vanderheyden

(English et Français)

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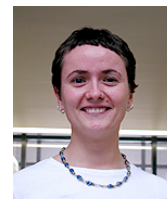
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