AMERICAN COLLEGE OF RHEUMATOLOGY
POSITION STATEMENT

SUBJECT: Complementary and Alternative Medicine for Rheumatic Diseases
PRESENTED BY: Committee on Rheumatologic Care
FOR DISTRIBUTION TO: ACR Members
Medical Societies
Allied Health Professional Societies
Arthritis Patients
Managed Care Organizations/Third Party Carriers
National Center for Complementary and Integrative Health
NIAMS
National Council Against Health Fraud
Arthritis Foundation

POSITIONS

The American College of Rheumatology (ACR) recognizes the interest in complementary and alternative medicine (CAM).

The ACR supports rigorous scientific evaluation of all modalities that improve the treatment of rheumatic diseases and recommends continued support of the National Center for Complementary and Integrative Health to further research and understanding about CAM.

The ACR understands that certain characteristics of some CAMs and some conventional medical interventions make it difficult or impossible to conduct standard randomized controlled trials. For these modalities, innovative methods of evaluation are needed, as are measures and standards for the generation and interpretation of evidence (1).

The ACR supports the integration of those modalities proven to be safe and effective by scientifically rigorous clinical trials published in the biomedical peer review literature. The ACR advises caution in the use of modalities not studied scientifically. In the absence of rigorous clinical trials, the ACR recommends advising patients that potential harm can occur from unproven or alternative therapies.

The ACR believes healthcare providers should be informed about the more common CAM modalities and should be able to discuss them knowledgeably with patients.

BACKGROUND

CAM refers to a group of diverse medical and healthcare systems, practices, and products that are not presently considered part of conventional medicine (2). The use of these modalities by patients with musculoskeletal and rheumatic conditions is extremely common.
Conventional therapies for many conditions in the spectrum of rheumatic and musculoskeletal diseases are not completely effective, have side effects and can be expensive. Patients desire less expensive, safe, simple, and effective alternatives. They may feel helpless in the face of unpredictable, progressive, and disabling disease and therefore seek therapies that offer them more control over their illness (3).

Surveys show that approximately 30% of Americans will at some time try complementary or alternative medicine regardless of their disease, education, background, or socioeconomic status (1). Rheumatologic conditions are one of the most common reasons for patients to use CAM therapies (4,5).

Complementary medicine is used together with conventional medicine while alternative medicine is used in place of conventional medicine. An integrative approach combines conventional medical therapies and CAM modalities for which there is some high-quality scientific evidence of safety and effectiveness (2).

There are many ways to categorize CAM modalities. Broadly defined, CAM is a wide domain of resources that encompasses health systems, modalities and practices and their accompanying theories and beliefs (1).

Scientific inquiry into little understood or unproven ideas, whether they are from CAM or conventional medical sources, can lead to new information that in turn can lead to improvements in the care of patients with rheumatic and musculoskeletal diseases. Conversely, the same scientific inquiry can be used to protect patients from unsafe, harmful and expensive CAMs. It is important for health care providers to elicit from patients their use of CAM, and it is important for patients to discuss CAM use with their health care team.

The ACR recognizes that interest in CAM is widespread and supports scientific study of potential new therapies such as that underwritten and coordinated by the National Center for Complementary and Integrative Health. Patients with rheumatic or musculoskeletal diseases as well as practitioners seeking information about CAM need guidance and CAM practices themselves need assessment.

The ACR believes that a scientific approach to health care delivery can bring opportunities for the incorporation of the best options from all sources of care, conventional or otherwise. The challenge is to avoid bias and to approach each possibility with an appropriate degree of skepticism or belief.

The ACR supports inquiry into the use of CAM by patients as part of a comprehensive health care evaluation. The ACR believes it is important for health care providers and patients to discuss openly CAM use along with potential risks and benefits associated with the use of such modalities. Providers should be proactive in inquiring about interest in CAM and referring patients to reliable sources of information such as the National Center for Complementary and Integrative Health and the Arthritis Foundation.
REFERENCES


Approved by Board of Directors: 10/02 08/05 08/08 08/2012 xx/2016

Additional Resources

https://nccih.nih.gov/health/integrative-health#cvsa

http://www.arthritis.org/living-with-arthritis/treatments/natural/