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The use of complementary/alternative medicine therapies for the self treatment of pain among urban, suburban, and rural communities

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This article addresses the important issue of patient self management with complementary medicines in different geographical populations.

They surveyed 595 people over 18 years old who spoke English and had experienced pain of some description in the previous 2 weeks. Of these 108 people from rural mid western communities in eastern Michigan and 487 people from urban and suburban Detroit community YMCAs. The survey used was the "Brief Pain Inventory: short form" which asks for numerical ratings from 0-10 of different aspects of pain in the previous 2 weeks. Demographics of the participants were also documented.

Their participants were mainly white (81%), female (60%), married (61%), employed full or part time (63%) and had incomes evenly distributed between USD\$25,000-100,000 pa. Lowest incomes were in people from rural areas and highest from suburban areas.

There were no significant differences in pain scores between different geographical areas. Forty five per cent reported pain relief with their current pain relief regimen.

Seventy six per cent reported using some form of complementary/alternative medicine. Use of complementary/alternative medicines varied ($p=0.001$) by geographical area with 82% of suburban, 77% of urban, and 58% of rural respondents reporting some use. Glucosamine and chondroitin were the most commonly reported medicines in all areas. Suburban people also used more of other complementary/alternative therapies (80%) versus 75% urban and 52% rural ($p=0.001$). These included heat/cold/ice, exercise/stretching/yoga, chiropractic treatment, massage, magnets, relaxation, prayer/meditation, biofeedback, healing touch, and others. Individuals <45 years old used more complementary/alternative treatments than those over 45 years ($p=0.001$).

Interestingly 31% reported that their primary care practitioner did not know of their self treatment choices especially in men ($p=0.011$), those <45 years old ($p=0.028$) and non-whites ($p=0.028$).

This study demonstrates that a large number (76% overall) of patients use complementary/alternative therapies for the self management of pain and about one third do not tell their primary care practitioner. Also people from different geographic backgrounds have differing rates of use with those from suburban backgrounds having the highest use and those from rural backgrounds having the lowest use.

Clinicians should ask specifically about the use of complementary/alternative therapies in all patients.

Reviewer

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Professor Paddy Phillips has held previous academic appointments at the University of Melbourne and University of Oxford. He has expertise in basic, clinical and health services research and is responsible for internal medicine services at Flinders Medical Centre and the Repatriation General Hospital, Daw Park, Adelaide (total budget ~\$55million). He is a foundation member of the recently established Australian Council for Safety and Quality in Health Care and in 2003 joined its Executive. He has been a member (1993-96) and is Chair of the Casemix Clinical Committee of Australia (1998-2000 and 2001-current). The Casemix Clinical Committee of Australia is the peak ministerial committee of the Commonwealth government responsible for casemix issues in health. He has been a member of the Strategic Research Development Committee (SRDC, one of the four peak committees of the NHMRC) and chair of the SRDC Evidence Based Clinical Practice Research Committee (1998-2000), and is foundation chairman of the Australian Centre for Evidence Based Clinical Practice. He has been a member or chaired various Royal Australasian College of Physicians committees and been a RACP Councillor, and has been a member of the Heart Foundation of Australia Cardiovascular Health Advisory Committee (the peak clinical committee of the Heart Foundation). He was a member of the South Australian Generational Health Review. He has authored over 130 academic publications and has held over \$9million in competitive research grants.