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KIDNEY CENTER

Podcast Transcript:

Dr. Ron Falk & Dr. Remy Coeytaux

Integrating Traditional and Complementary Medicine

“How can patients safely integrate traditional and complementary therapies?”

Patient                    How can patients safely integrate traditional and complementary therapies?

Dr Coeytaux            That’s where the area is challenging and rewarding, because I don’t know of any great definitive answers for that. My approach is to incorporate as many allopathic, modern medicine modalities that make sense for a given person, and then sit down with a trained health care professional, a physician, maybe other non-physicians, who understand the condition, the complication, the treatment options, risks and benefits of various modalities.

Usually that means working very closely with that patient’s physicians and health care providers. That’s very important. If we’re interfacing, integrating, if we’re really looking at different approaches, we need to work as a team. So starting with that basis, we then consider options that might be helpful. We try to the best of our ability, to do risk-benefit assessment.

Many times we just don’t have the data that’s necessary. For example, Chinese herbal therapies, which can be very effective. We don’t know the real risks in terms of synergistic effects with the medicines and such, so there’s a lot of unknown territory. That doesn’t mean that we can’t go there, closely watched and thoughtfully.

Dr Falk                    Most of our patients, whether they have vasculitis or kidney disease, are on a whole host of typical medications. Typically, medicines that suppress the immune system. How do we work, then, with somebody who’s interested in herbal, or other kinds of medications, that one would take by mouth? How do we figure out whether side effects are really attributable to FDA-approved medications, when compared to a Chinese herb?

Dr Coeytaux Well, most of the time we're in somewhat uncharted territory. We cannot point to clinical trials to look at side effect profiles of any combination of medications and herbs, because they just haven't been done. So if we work together as a team, with the patient and the health care providers to try some approaches that have been used in other cultures, in other traditions with some efficacy and we incorporate that as an adjunct to medical care. We may not know if there are side effects or if there is efficacy, what to attribute it to.

We don't know unless we do controlled studies. In the absence of those controlled studies, what I think is reasonable to do is, with real clear informed partnerships to go carefully and to monitor and to make decisions that really these kind of "N of 1 trials" if you will or just one person going through the experience, and we apply clinical judgment. That's what I mean by uncharted territory, is that we can't rely on a number of different studies to tell us what to expect, but we can still do things relatively safely, with potentially good and better outcomes. Every patient's different.

Dr Falk There are times when I learn that patients are on specific herbs or herbal groups, and I must admit it gives me a certain amount of pause as a typical American-trained physician because I'm not sure what the potential interactions or side effects are. Are there things that we do as American physicians that would give you pause as you are prescribing a different form of complementary therapy?

Dr Coeytaux Great question. I share that feeling that you just expressed there as a physician. I personally don't prescribe any herbs because I don't have that expertise. I also give pause to people who are taking a number of different substances that I don't really understand.

I do, however, work with people who do have that knowledge. Dr. Wunian Chen, whom you just talked to is one of such people, who is a very highly trained nephrologist, who is a very good clinician who understands both worlds, I trust his clinical judgment and make those decisions. He, in one person, resides the knowledge of both disciplines. We don't have that many people yet who have that ability. Over time we will train more physicians who have the knowledge of alternative medicine. Over time we'll get there. Right now, we have to rely on more than one person. So I give pause, too.

To answer your question about are there things that we do that give me pause in allopathic medicine: many. In fact, much of what we do gives me pause. I feel, over the past 10 years as I've been looking at these various traditional healing systems, while practicing my trade, I've become more cognizant of how we have to be careful with our own practices. There are many things that we don't fully understand. Just because it's FDA-approved doesn't give us a blank check for just prescribing and expecting patients to adhere to exactly what we're saying. There's much that's unknown.

What I have come to believe is we should try non-pharmacological approaches, less interventional approaches as much as possible. That's my own bias that has developed over time.

Dr Falk I completely agree with that concept. Especially when you don't know the cause of a disease it's very hard to know empirically—"N of 1" and in controlled trials whether something is working or not.

Dr Coeytaux We've talked largely about medicines and herbs. But there's a whole range of healing modalities that are not pharmacological. Now I consider herbs and supplements pharmacological. They're substances that we ingest—they're not that different from medicines in many ways.

But there are a whole number of healing approaches that lie outside of the pharmacological approaches which lie within the complementary and alternative medicine realms, that are underutilized, to say the least, in our medical system. Stress management, stress reduction: that should be more part of our daily life. Daily life choices, ways of thinking, ways of reacting to the world. So mind-body type things that I'm referring to. But also there's a whole area of healing modalities which can be considered energetic kind of modalities, such as acupuncture.

That's one that I happen to know more about, that I think is also underutilized in our system. There are a number of fairly safe approaches. Acupuncture is relatively safe. Even though it's an intervention—you're poking people with needles, it sounds like it's really pretty scary. But it's really quite safe. The number of complications is extremely low. Yet there seems to be an invoking of a healing response that seems to happen. So

however we can get the body to invoke a healing response, we should try.

Dr Falk           Therapeutic massage must similarly work. Interestingly, you may be too young to recall, there was an era in most American hospitals where nurses or nurses aides typically did therapeutic massage. That practice dissipated because of the forces of the economy, so the practices were no longer provided.

Dr Coeytaux      Because the health care system isn't paying for them.

Dr Falk            Exactly.

