

ALTERNATIVE AND COMPLEMENTARY THERAPY IN DERMATOLOGY

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Glossary

Aloe vera	صبار
Ammi magus	خلة شيطاني
Ammi visnaga	خلة بلدي
Anise	ينسون
Bergamot	برجموت
Bitter sweet night shade	حلوة مرة / عنب بري
Brewer's yeast	خميرة بيرة
Cayenne pepper	فلفل احمر / شطة
Chamomile	بابونج
Coleus	زهرة الغمد
Duckweed	عدس الماء / الطحلب البطي
Echinacea	اكناسيا / الحبة الصفراء
Garlic	ثوم
Hibiscus	كركديه
Lemon balm	ترنجان
Licorice	عرق سوس
Mayapple	بودوفيليم
Milk thistle	شوك النصاري
Neem	زنزلخت
Oat	شوفان
Onion	بصل

Propolis	عكبر
Rosemary	حصا لبان
Sarsaparilla	عشبة مغربی
Tea	شای
Tea tree oil	زيت البلقاء متعاقبة الاوراق
Thyme	ز عتر
Turmeric	كر كم
Vitex	كف مریم
White Oak tree	بلوط ابيض
Witch hazel	هماميلس

(Bedevian, 1994)

Introduction and aim of the work

Complementary and alternative medicine (CAM) is a broad domain of healing resources. It encompasses all modalities, and practices and their accompanying theories and beliefs, other than those intrinsic to the dominant health system of a particular society or culture in a given historical period (*Cohen, 2003*).

Eagle in 1980 previously defined CAM as including all the therapies which are not taught to students at medical school (*Eagle , 1980*). It includes a wide spectrum of health and healing strategies that derive from systems of evidence quite distinct from those practices that have emerged from Western biomedical science. Alternative medicine was also defined as the continuity of traditions, religious beliefs, and even quackery that non specialists practice in many ways to treat people (*Oumeish , 1998*).

The National Center for Complementary and Alternative Medicine (NCCAM) presently defines complementary and alternative medicine (CAM) as covering a broad range of healing philosophies , approaches, and therapies that conventional medicine does not commonly use, accept, study, understand, or make available (*Cohen, 2003*).

Therapies are termed as Complementary when used in addition to conventional treatments and as Alternative when used instead of conventional treatment (*Cohen , 2003*).

The styles and methods used are unconventional. Moreover, it is complementary, serving and mutually supplying the lack of therapy that exists elsewhere. It is holistic and attempts to stimulate the body's natural self-healing and self-regulating abilities (*Ben-Arye et al, 2003*).

Complementary and alternative medicine include acupuncture, homeopathy, nutritional & herbal medicine, dietary supplements , therapeutic massage, traditional oriental medicine, climatotherapy, psychotherapy, hypnotherapy, biofeedback and many others which mainly reside outside conventional medicine (*Barnes, 2003*).

Many CAM therapies are called holistic health care as they treat illness in terms of its effect on the whole person as chinese medicine, herbal medicine and others. They have effects on physical, mental, emotional, spiritual, and environmental levels (*Cohen , 2003*).

Historical review

Alternative medicine was the fundamental method used by humans to preserve their health and avoid diseases since the dawn of time . It is the type of natural medicine that has been known and practiced ever since the recording of history and in particular in the old world (*Oumeish , 1998*). Pre-arabian medicine in the old world was to our present understanding complementary and unconventional in most of its contexts and practices (*Oumeish , 1998*).

Herbal medicines were used from prehistoric times .The Pharaohs, the Greeks, and the Romans developed medicinal and religious rites associated with water. Exposure to sunlight and the use of natural health spas and mud have been used for thousands of years to treat psoriasis and other diseases (*Abels et al, 1996*).

The Old Egyptian "Pharaohs" Medicine

The Old Egyptian "Pharaohs" medicine is the oldest and goes back to 4500 BC. The medical papyri are believed to date back to 1600 BC and contain remedies for all kinds of diseases. (*El-Gammal, 1993*).

The ancient Egyptians knew many of the therapeutical effects of the medicinal plants. They produced creams that contain fruit acids from mango, apple, and other fruits. They used many herbs in the treatment of disease and in particular skin diseases, such as alopecia and skin infections. The ancient healing art of reflexology was used to encourage healing , besides pressure on specific parts of the body that could have an anesthetizing effect on the related area (*Oumeish , 1998*).

The Greek Medicine

The Greeks used aromatic oils for treating diseases and also for cosmetic purposes. They used herbal medicine, and the eminent physician Pedacius Diosorides wrote his herbal medicine book that continued for 1200 years to be a standard Western medical reference on herbs. The ancient Greek physicians knew how to use many remedies from herbs and plants, metals and minerals, and animals. These remedies were given per os, in liquid form or in the form of ointments and eye-drops (*Ramoutsaki et al , 2000*).

Indian Medicine

Four thousand years ago, the indian medical knowledge was codified into a system called the Ayurveda which remains a vital system of medicine and drug therapy in India and elsewhere. Indians used a lot of herbal medicine, yoga and urine therapy (*Borchardt , 2003*). Yoga is the teaching of the suppression of all activity of the body and the mind. Urine therapy includes rubbing fresh urine into the body. It is useful in cases of acne, psoriasis, eczema, sunburn, and pruritus. It is effective for athlete's foot, and as compressors for the body and scalp application to help hair growth (*Oumeish , 1998*).

Chinese Medicine

Chinese medicine (CM) is a wide subject and is practiced throughout China and East Asia by millions of people since the beginning of China's history. CM has been playing very important roles in the prevention and treatment of diseases. The major component of CM is chinese herbal medicine. The other branches include acupuncture, dietary therapy, massage, and others (*Siegel, 2002*). CM is a holistic type of medicine that treats the body as a whole. It treats the vital energy and encourages the body, mind, and spirit to return to a harmoniously balanced state of well being. This requires a mixture of various herbs individually formulated for the patient (*Koo & Desai, 2003*). Chinese dietary therapy is based on the theory that "we are what we eat," and what we eat is important to our health and could cause illness. CM is an alternative therapy that can be used in the treatment of dermatologic disorders (*Bedi & Shenefelt , 2002*).

Ancient arab-islamic medicine

Arabs used many kinds of herbs to treat different diseases and those are still used in the european pharmacopeia eg : Psoralens as repigmenting agents for vitiligo and Wallflower (gilly flowy) leaves for treating eczema , Nigella sativa mixed with olive oil is a good local moisturizer for ichthyosis and psoriasis , Forsythia suspense (lian qiao) for abscesses and folliculitis , Aloe vera (aloe) for vitiligo , psoriasis and fungus infection (*Nasr, 1987*). Honey is topically used to clear infections, abscesses, ulcers, folliculitis and to treat lice in children (*Oumeish , 1998*).

Value of CAM

From the physicians' view

The ultimate aim of medical care is “to cure some-times, to relieve often and to comfort always”. Physicians however sometimes encounter patients who cannot be treated by conventional means or whose disease is refractory to standard therapy or are ones for which there is no effective standard therapy. This makes physicians occasionally seek alternative ways of healing as a newly progressing treatment options (*Wolf, 2003*).

Complementary therapies are used in addition to conventional treatments, to attain good results as the sum of all done measures will insure excellent cure rates.

Alternative therapies on the other hand are used instead of conventional treatment from the start (*Cohen , 2003*) .

Some alternative therapies , individually, and some complements to other therapies , have potential effectiveness after standard medical treatments have failed to give comfort to patients (*Matz et al 2003*). More over , some therapeutic alternatives are safer choices or in some cases are the only effective treatments (*Dattner 2003*).

From the patients' view

Many patients want to do everything to heal their disease followed by a quest for improved quality of life. They may try every available means for treatment, especially when a chronic or disfiguring disease is encountered. This is related more to the chronicity of their disease than to dissatisfaction with the physician's prescribed treatments. Patients are ready to try anything alternative but when it comes to traditional medicine, they only want to receive approved treatments that have undergone rigorous testing for fear of their adverse reactions (*Parish & Witkowski , 2003*).

Other patients are interested in a less toxic treatment with less side-effects and cheaper than conventional treatments and are disappointed with conventional treatment and stress (*Ben-Arye , et al 2003*).

In terms of patient-doctor interaction; the personal bond, the time, sympathy, listening, and understanding, are services that patients can find with greater generosity with alternative healers of all kinds than with skilled technicians and

diagnosticians and to prescribe new, efficient and expensive drugs. This makes great demand for them and for their methods (*Wolf, 2003*).

The current state of CAM

Complementary and alternative medicine is already a well accepted form of health care, and the predictions are that its popularity will continue to soar in the future. There is a high percentage of population who use complementary therapies and a vast number of visits to alternative medical practitioners; a number that is estimated to exceed the number of visits to primary care physicians (*Levin & Maibach 2002*).

At present, complementary and alternative medicine is more popular than ever before and dermatology has not remained unaffected by this trend. Data for the life-time prevalence of CAM used by patients with dermatological disease ranges between 35 to 69%. The most popular modalities include herablism and dietary supplements (*Ernst, 2000 a*).

Recent surveys show that about one-half the general population and one-third of allergic patients use alternative remedies (*Senna et al, 2000*). In a British survey, 17.9% of all children were found to use alternative therapies, often because of skin problems, and the most frequently used methods were homoeopathy, aromatherapy, and herbal medicine (*Wolf, 2003*).

Continuing controversy however exists over whether or not to advocate alternative therapies, to integrate them into medical education, to give them any kind of scientific legitimacy, or

to promote cooperation between conventional physicians and those who practice and research this alternative form of health care (*Wolf, 2003*).

An alternative therapy may involve the use of unusual method in the treatment regime. It has been therefore suggested that the physician has to perform certain steps before starting the alternative therapy and the final treatment selected should be compatible with the dictum 'Do no harm' ; the following steps are suggested by John and Tkach in 1989 :

- 1) Establish the diagnosis by obtaining appropriate history , perform the physical examination , do the appropriate laboratory studies and ask about the tried treatments and their results .
- 2) Exhaust the standard treatment options, found in text books and Medline search and if there are any other standard treatments that have not been tried and are not safe , explain their risks and costs to the patient and ask him if he would like to try alternatives and let him decide .
- 3) Medline search about all previous and recent data about any wanted subject of treatment plan. (*John and Tkach , 1989*).

Following these steps the physician can do referral to or comanagement with a CAM provider The CAM provider in his turn has to determine whether the patient presents a problem treatable through CAM. The patient should be informed that the condition is not treatable through CAM (*Cohen, 2003*).

The pervasive use of complementary medicine, raises several concerns. Many of these arise because most complementary medicines are not licensed as medicines, and therefore evidence of quality, efficacy and safety is not required before marketing (*Barnes 2003*). In most

alternative methods, effectiveness has not yet been proven by clinical trials or scientific proof has not even been attempted as well as a failure to report failures (*Smolle* , 2003). Alternative medicines may also pose dangers because they are not at worst simply ineffective, but can themselves cause significant problems (*Parish & Witkowski* , 2003).

The present essay focuses on some of the most popular unconventional therapeutic methods currently used. These include acupuncture and electrostimulation; climatotherapy and balneotherapy; herbal medicine; psychotherapy, hypnotherapy and biofeedback; biotherapy and homeopathy.