

Naturopathic Physicians' Approach to Pain Management

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Naturopathic medicine is a distinct primary health care profession, emphasizing prevention, treatment, and optimal health through the use of therapeutic methods and substances that encourage individuals' inherent self-healing process. The practice of naturopathic medicine includes modern and traditional, scientific, and empirical methods.

Naturopathic Medicine Principles:

1. First, do no harm
2. Identify & treat the root cause
3. Treat the whole person
4. The healing power of nature
5. Doctor as teacher
6. Prevention is the best medicine

Naturopathic Physician's Therapeutic Order:



The Bottom Line:

- We need to diagnose and treat the root cause of pain.
- We need to treat the whole person; pain is multi-dimensional.
- We need more healthcare practitioners who are qualified in alternative methods for treating pain to be covered by insurance.
- Healthcare practitioners need to communicate & work together.

Naturopathic Medicine Modalities for treating chronic, non-cancer pain:

- **Nutrition & Nutraceuticals**
- **Botanical Medicine**
- **Prolotherapy**
- **Myofascial Release & Trigger Point Therapy**
- **Naturopathic Manipulation**
- **Hydrotherapy**
- **Mind-body medicine (biofeedback, breathing techniques, meditation)**
- **Craniosacral Therapy**

Research

General Overview “Identify & treat the root cause”: Many patients with chronic pain seek Complementary and Alternative Medicine (CAM) in conjunction with pharmaceuticals. In fact, a survey of 908 patients with chronic pain, who were on long-term opioid use as a primary treatment, showed 44% of the individuals were receiving some form of CAM. Over half of the 44% reported effectiveness with the use of CAM in decreasing pain within the last year. Fleming S., Rabago D., Mundt M., Fleming M., CAM therapies among primary care patients using opioid therapy for chronic pain. *BMC Complementary and Alternative Medicine* (2007), 7:15 doi:10.1186/1472-6882-7-15

Nutrition & Nutraceuticals “The healing power of nature”: Standard American Diet vs. Anti-inflammatory diet in Rheumatoid arthritis patients; each diet group was also split into placebo or supplementing fish oil. The Anti-inflammatory diet alone decreased pain by 14% compared to placebo. Adding fish oil to an AID vs SAD brought a significant reduction in tender (28% vs 11%) and swollen (34% vs 22%) joints ($P < 0.01$). Inflammatory markers in the blood were measured & decreased significantly with the Anti-inflammatory diet as well as the AID plus fish oil group. Adam O, Beringer C, Kless T, Lemmen C, Adam A, Wiseman M et al. Anti-inflammatory effects of a low arachidonic acid diet and fish oil in patients with rheumatoid arthritis. *Rheumatology International* (2003) 23: 27. doi:10.1007/s00296-002-0234-7

Botanical Medicine “First do no harm”: Meriva, a standardized Curcumin extract from Turmeric root was compared with acetaminophen and nimesulide (NSAID) for pain. At a dose of 2 g (corresponding to 400 mg of curcumin), Meriva showed clear analgesic activity, comparable with that of a standard dose (1 g) of acetaminophen, but lower than that of a therapeutic (100 mg) dose of nimesulide. On the other hand, gastric tolerability was significantly better than that of NSAID and comparable with that of acetaminophen. Francesco DP, Giuliana R, Eleonora ADM, Giovanni A, Federico F, Stefano T. Comparative evaluation of the pain-relieving properties of a lecithinized formulation of curcumin (Meriva®), nimesulide, and acetaminophen. *Journal of Pain Research*. (2013) 6:201-205. doi:10.2147/JPR.S42184.

Craniosacral Therapy “Treat the whole person”: 54 patients received either CST - Craniosacral therapy or light-touch sham therapy. After 8 weeks, significant decreased in pain intensity were found in the CST group compared to sham. At 20 weeks, significant between-group differences were also found for pain on movement, functional disability, physical quality of life, anxiety and patients' global improvement. Haller H, Lauche R, Cramer H, et al. Craniosacral Therapy for the Treatment of Chronic Neck Pain: A Randomized Sham-controlled Trial. *The Clinical Journal of Pain*. (2016) 32(5):441-449. doi:10.1097/AJP.0000000000000290.