



CAP Lung Cancer Medical Writers' Circle

Complementary and Alternative Medicine: Focus on Chinese Traditional Medicine

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Complementary and alternative medicine (CAM) in lung cancer may include a number of systems and interventions, including Chinese traditional medicine.

In this first article on Chinese traditional medicine and lung cancer, I am introducing some general concepts regarding the medicine as well as research in lung cancer, cancer in general, and Chinese traditional medicine.

Chinese traditional medicine is a whole system of medicine that has been used for thousands of years in the treatment of all imbalances and diseases

How differences divide—unnecessarily

The obvious differences between Chinese and Western medicine make it difficult for many Western scientists and Chinese medicine scholars to imagine that they can join forces—taking the very best from both traditions— both in the area of clinical practice as well as create valid research projects.

To understand why this happens, let's take a quick look at the basics of Chinese medicine and the differences in the Western and Eastern approach to treating disease and disorders.

The foundations of Chinese traditional medicine

Chinese traditional medicine relies on four basic forms of treatment to prevent or remedy disease and disorders: herbal therapy, acupuncture, nutritional therapy and exercise/ meditation.

These therapies are used to help the body restore balance and harmony in the mind/body/spirit whenever it is attacked by a disease causing “pernicious influence” or disrupted by internal imbalances.

Western and Chinese Medicine Contrasts

There are three main areas of contrast between Western and Chinese medicine that may contribute to the difficulties in co-management of people with lung cancer as well as complexities in creating effective Chinese medicine research projects.

Western medicine designs drugs, treatments and therapeutic techniques to vanquish broad categories of disease or disorders. For example if you—and a hundred other people—suffer from a migraine, in the Western approach you could each be given the same drug to treat the general problem of severe head pain or to counter vascular constriction.

In Chinese medicine, by contrast, migraine pain may be viewed as but a symptom of any number of disorders and disharmonies affecting an individual's mind/body/spirit.



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Chinese traditional medicine treatment focuses on identifying the underlying disharmony and creating an individualized treatment suited to that diagnosis. Since traditional Chinese medicine does not view the immune system, disease resistance and cancer in the same way as Western medicine, it has been difficult for Western doctors and researchers to understand that Chinese treatments may attack these causes of disease.

The goals of treatment are often different in Chinese and Western medicine. Chinese medicine may produce healing in the mind/body/spirit, even in the presence of persistent disease;

Western medicine is usually designed as an all or nothing proposition—either the therapy cures the disease or does not.

In the 21st century, hopefully, Western scientific insights and Chinese treatment of the mind and spirit along with the body will begin to blend. There is no contradiction between the two systems. When clearly understood, they can strengthen and complement one another.

FIRST; Traditional Chinese medicine treatments and Western therapies approach lung cancer and other cancer treatment from different points of view.

While most Western cancer therapies focus on “killing” the cancer or “eliminating” the tumor, the primary goal of Chinese traditional medicine is to create wholeness and harmony within a person, allowing the body to heal itself.

Chinese medicine strives to make the internal constitution stronger and focuses much more on immune functions that allow the body to fight cancer than does Western treatment.

Therefore, it would make much more sense to focus on treatment of the immune system and in research settings study the impact of Chinese traditional medicine on immune responses, instead of looking at its impact on tumor-eradicating abilities.

In short, Chinese medicine should be evaluated on its own terms and in light of its own treatment goals and objectives, not in terms of Western defined treatment goals and objectives.

Disease Prevention as a Goal:

A major aspect of Chinese traditional medicine is disease prevention; this is accomplished by creating balance and harmony in the body's various systems.

In Western medicine lung cancer treatment, the main focus is on eradicating illness once it appears in the body. Studies that look at the ability of a treatment to prevent disease are difficult and take many years to complete.

But these are what are needed if we are to understand the depth of Chinese medicine's abilities. If the funding, as well as the will, were there, it could be done.

Early Treatment:

Chinese medicine is most commonly used as a primary therapy in treating early stages of lung cancer and other



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cancers. Most Western studies, however, are designed to evaluate its effectiveness in treating very late stage cancers.

Yet, the late stage of disease is often a time when any treatment may be much less successful, possibly harder to tolerate, or is more difficult for a person to stick to. The rationale is that “if it works in very late stages, then is it likely to work in earlier stages. This is folly regarding Chinese medicine treatment and research. In traditional Chinese medicine literature, there is little indication that the recommended therapies will stop cancer in a very late stage.

Dismissing a treatment because it is not effective in very late stage cancer may deny scientists and practitioners the opportunity to study an effective treatment for early stage cancer.

SECOND: Western medicine is often enhanced by the simultaneous use of traditional Chinese therapies, although there are extremely few studies in the West that have explored this synergistic strength.

When intensive Western treatments are being used, Chinese medicine can often relieve negative side effects and enhance the treatment.

In China, people undergoing chemotherapy and radiation treatment always have the choice to use Chinese herbal medicine and other therapies, such as Qi Gong exercise, as adjunctive therapies to reduce side effects and increase the efficacy of the Western treatment.

For example, herbal formulas based on the Chinese herb Ji Xue Teng (*Spatholobus*) are given to reduce bone marrow suppression and enable continuation of chemotherapy treatments at a normal schedule.

Studies which center on alleviating side-effects as well as enhancing Western treatment might be the most efficacious to pursue.

Why are practitioners and physicians slow to push for more studies?

In addition to the differences noted above, there are other forces at work that keep Chinese and Western doctors from forming an intellectual alliance.

The Western medical establishment (and the laws) in this country is strongly against the use of Chinese medicine to treat cancer. Almost everywhere in the United States it is illegal for anyone to assert that Chinese medicine can be used to treat cancer. That certainly puts a damper on doctors' inquiry into Chinese medicine cancer treatments, and it also tends to discourage expression of opinion or findings.

In addition, the Chinese medicine and alternative medicine communities, so long shut off from the Western medical community, has been slow to recognize the value of controlled clinical studies of treatments that have been used effectively for hundreds of years.



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Where do we begin?

A position paper published by the NIH Center of Complementary and Alternative Medicine (NCCAM) asserts that future research studies should be designed in such a way that they further the development of new treatments, test old treatments and—perhaps most important—take into consideration both what people can potentially do and the limitations in their daily lives.

There is also a new focus on outcomes research – looking at real results such as whether people are living longer and with more quality of life. Chinese medicine treatments could certainly be part of this research.

Conclusion:

I have just begun to explore some of the issues in lung cancer treatment and research using Chinese traditional medicine. In the next articles, we will explore Chinese medicine treatments used in lung cancer in more detail.

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Dr. Misha Ruth Cohen is recognized internationally as a practitioner, lecturer, researcher and leader in the field of traditional Chinese medicine. For more than 34 years, she has practiced Asian medicine. Her clinical practice concentrates on complex disease including cancer support, cancer prevention, hepatitis C, HIV and complex gynecology.

She is the author of “The Chinese Way to Healing: Many Paths to Wholeness,” “The HIV Wellness Sourcebook,” and “The Hepatitis C Help Book.” Dr. Cohen is Clinical Director of Chicken Soup Chinese Medicine, Executive Director of the MRCE Foundation and Research Specialist V for Integrative Medicine at the UCSF Institute for Health and Aging, all in San Francisco. On a national level, she is the Secretary of the Board of the Society for Acupuncture Research and sits on the Brainstorming Team of the Hepatitis C Caring Ambassadors Program.

Misha is a principal investigator at UCSF in Chinese herbal medicine clinical trials and translational research for cancer and cancer prevention. Her primary focus is viral-related cancers such as HPV, HIV and hepatitis C. Currently, she is conducting a two-year clinical trial and translational research in Chinese herbal medicine for the prevention of anal cancer in HIV+ people conducted at the UCSF Clinical and Translational Science Institute’s Clinical Research Center. Also, she is designing Chinese herbal medicine and integrative medicine translational and clinical research in hepatitis C with Dr. Stewart Cooper at California Pacific Medical Center.