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Original article

Integration between orthodox medicine, homeopathy and acupuncture for inpatients: Three years experience in the first hospital for Integrated Medicine in Italy



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ABSTRACT

The hospital in Pitigliano (Tuscany) is the first hospital in Italy to put into practice a model of Integrated Medicine. This clinical setting caters for the use of complementary medicine (homeopathy and acupuncture (針灸 zhēn jiǔ)) alongside orthodox therapies (conventional medicine). The therapeutic model implicates doctors who are experts in complementary and alternative medicine (CAM; 補充與替代醫學 bǔ chōng yǔ tì dài yī xué) and the rest of the hospital personnel working together as equals. This contribution explains the difficulties, critical aspects and potential of this innovative setting.

The clinical setting for Integrated Medicine was evaluated in part through observation and in part through the analysis of approval questionnaires. The writers of the questionnaires were the orthodox medical personnel and the hospital patients.

The project is still evolving today in spite of the initial partial contrariety of some doctors in the hospital and some external doctors in the area. However, it can already be considered a positive experience, as confirmed by the high approval gained from many health workers and most of the hospital patients. Moreover, the follow-up carried out through specific surgeries dedicated to CAM is extremely positive.

Up to now 532 inpatients suffering from acute illnesses, relapse of a chronic illness or neurological or orthopaedic rehabilitation following strokes, brain haemorrhage, neurological illness or limb prosthesis operations have been treated. This work has tried to illustrate the innovative and positive experience for the Italian public health authorities so that it may also be useful to anyone who would like to promote similar initiatives within its public health Institution.

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1. Introduction

Complementary medicine is not officially recognised by orthodox medicine in most of the Western countries, Italy included. This is mainly due to cultural barriers, therefore it has not been possible to set out regulations nor to find credit within the Institutions. However, the opportunity given by the Italian Regional Government to apply operational measures within the region allowed the

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Centre for Integrated Medicine of Pitigliano (Tuscany) to implement an innovative healthcare approach (see Appendix 1).

The Centre for Integrated Medicine of Pitigliano was founded by the Health Government of the Tuscany Region in February 2011 in order to provide assistance to patients and to carry out scientific research projects. The Centre is the first public hospital in Italy which provides inpatients with homeopathy remedies, acupuncture (針灸 zhēn jiǔ) treatment as well as Traditional Chinese Medicine (中醫 zhōng yī; TCM). The cutting-edge project entails several objectives to be achieved within the Italian public health-care system:

(i) to potentially establish a clinical setting between orthodox medicine and complementary and alternative medicine (CAM; 補充與替代醫學 bǔ chōng yǔ tì dài yī xué)

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- practitioners, based on mutual agreement and close cooperation in terms of therapy and treatment;
- (ii) to test the interdisciplinary approach among inpatients;
- (iii) to verify the beneficial effects deriving from the approach regarding the improvement of the quality of life in patients suffering from chronic diseases as well as the decrease of side-effects triggered by conventional therapy;
- (iv) to verify the potential advantages of integrated medicine in terms of cost management regarding the regional healthcare system.

This contribution describes the hospital clinical setting of Integrated Medicine, the operational plan, the difficulties regarding its fulfilment, the crucial points, the opportunities and beneficial effects experienced by practitioners and patients three years after the beginning of the project. Among the tasks, CAM physicians (homeopathy, acupuncture and TCM) provide patients with Integrated Medicine, at five clinics (for outpatients) and in hospital wards, as well as at the neurological and orthopaedic Rehabilitation Centre (for inpatients) in Manciano (Tuscany). Patients at the Centre in Manciano have experienced cerebral vascular accidents or suffer from chronic neurological diseases (ALS, multiple sclerosis, Parkinson's syndromes and so on), or have undergone surgery for knee and hip implants. This represents a ground-breaking project for the Italian healthcare system whose preparatory plan lasted for two years (from 2008 to 2010) (see Appendix 1).

1.1. Integrated medicine: treatment techniques and typology

Starting in the '90s the concept of combining orthodox or conventional medicine and CAM when treating patients within the health service, (integrative medicine or integrated medicine and Integrative Health Care) has spread throughout the western world, and this collaboration has taken place in various forms according to, in primis, the culture and governing body of the country where it has been developed. $^{1-16}$

The Centres which offer Integrated Medicine can be divided into three typologies:

- (i) healthcare services provided by single practitioners who apply different treatment techniques. These techniques are mainly used individually. The first typology entails treatment differentiation and does not have practitioners involved who work together.
- (ii) healthcare services provided by practitioners, within the Centre, who are specialised in more than one discipline. They perform integrated medicine individually, however they do not co-operate together and for this reason this cannot be considered a Centre of Integrated Medicine.
- (iii) interdisciplinary therapeutic treatment provided by a team of professional practitioners specialised in several disciplines. They work together on each medical case and mutually agree on what therapeutic treatment is the most suitable and appropriate for each patient (interdisciplinary approach). This is the most significant feature which distinguishes an authentic Centre for Integrated Medicine. The Centre of Pitigliano belongs to this third typology.²

1.2. The Centre for Integrated Medicine at the Hospital in Pitigliano

Patients: Mainly elderly people (30% are over 65) suffering from chronic diseases which are caused by several factors and characterised by two or more co-existing medical conditions. The relapse of chronic diseases or the intensification of disorders relating to a

primary illness are among the first causes which lead patients to be admitted to hospital (Table 1). The Clinics for Integrated Medicine provide healthcare services to patients from the Province of Grosseto (48%), but also to patients from other Tuscan provinces (40%) as well as other regions (12%). At the Rehabilitation Centre in Manciano patients from other Italian hospitals are admitted in order to begin a rehabilitation programme lasting for three weeks or longer (Table 2).

1.3. Organisation of the Centre

General information - Each Centre for Integrated Medicine belonging to the third typology differs from the others based on its project specifications. In the Centre in Pitigliano the project was developed over a 2-year period, from 2008 to 2010, by a scientific committee appointed by the governing bodies of the Tuscany Region and led by a team of practitioners specialised in Integrated Medicine (see Appendix 1). The task of the Committee was to study how the Centre could be recognised and accredited from a legal and institutional perspective, focussing on the necessary measures and actions to implement CAM within a hospital structure. The study has led to: the modification of the informed consent model in order to adapt it to integrated treatment (orthodox medicine, homeopathy, acupuncture and TCM); the expansion of the regional healthcare codes by introducing specific codes for CAM; the addition on the medical chart of a space where homeopathy, acupuncture and TCM treatments (detailed anamnesis, semiological criteria, specific diagnosis based on the CAM typology) can be registered; the addition of information concerning the integrated treatment that the patient has received in order to inform the family doctor; drafting of new codes for patients' discharge and medical chart filing for legal purposes, by registering the specific codes related to the CAM treatments.

Location — In order to build the Centre, the structure of the hospital was modified. CAM clinics destined for outpatients and their waiting areas were changed, taking into account the criteria used by the Royal London Hospital for Integrated Medicine and the Glasgow Centre for Integrative Medicine.

Clinical setting — The team of professionals working in the Pitigliano Hospital and the Rehabilitation Centre of Manciano is comprised of practitioners specialised in orthodox medicine (internal medicine, orthopaedics, neurology, surgery and radiology). The addition of five professional practitioners specialised both in orthodox medicine and homeopathy, acupuncture and TCM to the regular team of physicians was the main requirement for the building of the Centre for Integrated Medicine; moreover each CAM treatment is followed by a tutor who monitors whether the treatment is properly implemented. This pattern does not often occur in Centres for Integrated Medicine as practitioners from different medical backgrounds are part of the team; we noted that this factor may have a negative effect on the efficiency of the team and therefore we decided to experiment this particular clinical medical

Table 1Reasons for hospital admittance to the hospital in Pitigliano. Period 2011–2013.

Reason for admittance %	
Cardio circulatory problems	12.3%
Abdominal medical syndromes	15%
Neurological syndromes	10.3%
Respiratory syndromes	20.3%
Endocrine/metabolic syndromes	2%
Painful osteo-arthritic syndromes	20%
Syndromes of multi-organ disfunction	9.5%
Oncogenic diseases	10,60%

No. patients treated with IM 242; Gender Male: 134; Female: 108.

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