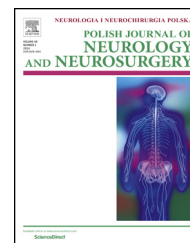


Available online at www.sciencedirect.com

ScienceDirect

journal homepage: <http://www.elsevier.com/locate/pjnns>

Original research article

The frequency of complementary and integrative medicine methods in headache patients and their spending habits

Burcu Polat^a, Ozlem Saatci^b, Nesrin Helvacı Yılmaz^{a,*}, Ozge Arıcı Düz^a^a Istanbul Medipol University Faculty of Medicine, Neurology Department, Turkey^b Sancaktepe Training and Research Hospital, Otorhinolaryngology Department, Turkey

ARTICLE INFO

Article history:

Received 27 October 2017

Accepted 19 December 2017

Available online xxx

Keywords:

Complementary and integrative medicine

Headache

Spending habits

ABSTRACT

Background: It is known that complementary and integrative medicine (CIM) methods are especially used by patients with chronic headaches. The aim of our study is to increase the knowledge on this topic, to provide objective data about use in Turkish headache patients. **Methods:** This study included 425 patients with headache. The survey form prepared was filled in under the supervision of a health professional. The questionnaire included 2 items, about CIM methods and finance.

Results: Among the patients evaluated, 316 were female, and 109 were male. All of 52% answered yes to the question “did you ever use any CIM treatment method for headaches during your life?”. The most frequently used methods were combined (herbal + one or more other method) (29.6%), herbal (9.4%) and cupping therapy (4.2%). Among the patients that used combined methods, 26.9% had spent 30–100 TL (5–25 euro), 20.6% had spent 100–300 TL (25–70 euro), 26.9% had spent 300–500 TL (70–120 euro) and the last two groups that formed 12.6% had spent 500–1000 (120–250 euro) and >1000 TL (>250 euro).

Conclusion: Half of the patients that applied to outpatient clinic with headaches use one or more of these methods and make budgets in accordance with their income levels. Physicians should have sufficient knowledge and clinical opinions about the CIM methods used by headache patients.

© 2017 Polish Neurological Society. Published by Elsevier Sp. z o.o. All rights reserved.

1. Introduction

There is a growing interest in complementary and integrative medicine (CIM) all over the world. Acupuncture, phytotherapy, yoga, massages, and meditation are the most common CIM methods.

Headaches and related disorders, and in particular migraine headaches are extremely common in public and these conditions lead to workforce loss [1]. The one-year prevalence is 10–18% in migraine, and 31–90% in tension-type headache. Complementary and integrative medicine is in widespread use among patients in tertiary headache care units. It is known

* Corresponding author.

E-mail addresses: bpselkie@gmail.com (B. Polat), oreleos@hotmail.com (O. Saatci), drnesrin76@gmail.com (N.H. Yılmaz), drozge2004@hotmail.com (O.A. Düz).
<https://doi.org/10.1016/j.pjnns.2017.12.007>

0028-3843/© 2017 Polish Neurological Society. Published by Elsevier Sp. z o.o. All rights reserved.

that CIM methods are especially used by patients with chronic headaches. The money spent on these methods is increasing on a global scale and is reaching the expenditures on mainstream medicine. The cost of CIM is still being debated. Cost effectiveness can only be assessed for a specific complementary therapy in a particular indication within a particular health care system [2].

The evidence that is available suggests that the use of these complementary therapies represents an additional cost. Another review included 51 reports from 49 surveys in 15 countries estimates of 12-month prevalence of any CIM ranged from 9.8% to 76%; and from 1.8% to 48.7%. Studies have persistently shown that CIM users are more likely to be female, better educated, middle-aged and report poorer health status than non-users [2–4]. Successful drug-based prophylactic treatment is achievable in about two thirds of patients suffering from migraine, but side effects of pharmacological treatment often limit these medications. Furthermore, patients often avoid regular intake of drugs for prophylactic treatment of headaches. Therefore, patients are very attentive to CIM strategies in the prophylaxis and treatment of headache attacks. Complementary and integrative medicine practitioners emphasize the holistic, individualistic, empowering and educational nature of CIM. Recently, it is being emphasized that CIM methods should also be considered in the treatment of primary headaches [5].

The aim of our study is to increase the knowledge on this topic, to provide objective data that can be used to monitor development, and data about CIM that can be discussed during health education, service delivery, and planning, particularly in headache medicine.

2. Materials and methods

The study included 425 headache patients that applied to our neurology outpatient clinic between January 2015 and March 2015. The patients were evaluated by a neurologist specialized on headache. The patients with pyramidal signs, cerebellar signs, clear gaze palsy or autonomic dysfunction and with a history of head injury, encephalitis, cerebrovascular attacks, dementia or exposure to toxic agents were excluded. The patients' headaches were not classified as primary or secondary.

This study is based on the evaluation of the data obtained from the survey form (Appendix A). Because there are no publications or combined databases about CIM health expenditures in Turkey and due to the presence of unregistered CIM providers/practitioners, the approximate costs were calculated based on self-report. The study was approved by the ethics board.

2.1. Statistical analysis

The SPSS-20 program was applied. The chi-square test was used to compare the sociodemographic and clinical data. The Pearson and correlation tests were used to assess the correlation between the distribution of features across the group. p values smaller than 0.05 were considered to be significant.

3. Results

Among the patients evaluated 316 (74.4%) were female, and 109 (25.6%) were male. The mean age was calculated as 39 (18–82, SD 12.9). With respect to the education level of the patients, 6.8% (29) were illiterate, 29.4% (125) had primary school education (5 years), 10.6% (45) middle school education (8 years), 20.7% (88) high school education (12 years), and 32.5% (138) university education (16 years).

The monthly incomes of the group were distributed as follows: 22.8% (97) earned between 500 and 1000 Turkish Liras (TL) (100–250 euro), 34.1% (145) between 1000 and 2000 TL (250–500 euro), 24% (102) between 2000 and 3000 TL (500–750 euro), 12.9% (55) between 3000 and 5000 TL (750–1200 euro), 6.1% (26) over 5000 TL (over 1200 euro). Among the patients 52% (221) answered yes and 48% (204) answered no to the question “did you ever use any CIM treatment method for headaches during your life?”. The most frequently used methods were combined (herbal + one or more other method) (29.6), herbal (9.4%) and cupping therapy (4.2%). The other methods used were psychoreligious methods (2.4%), acupuncture (1.9%), manual therapies (1.4%), thermal springs (1.4%), aromatherapy (0.9%), and animal products (bee derived, leech, etc.) (0.7%). One person that corresponded to 0.2% was unable to clearly define what they used (Table 1).

Among the patients that used mixed methods, 26.9% had spent 30–100 TL (5–25 euro), 20.6% had spent 100–300 TL (25–70 euro), 26.9% had spent 300–500 TL (70–120 euro) and the last two groups that formed 12.6% had spent 500–1000 TL (120–250 euro) and >1000 TL (over 250 euro).

No significant relationship was identified between method use/preference and education ($p = 0.348/p = 0.40$) (Fig. 1).

No significant relationship was detected between the method use/preference of gender ($p = 0.137$). There was no correlation between genders and the money spent ($p = 0.937$). There was no correlation between gender and the method preferred ($p = 0.362$). When the correlation between gender and the frequency of method use was examined, it was observed that women with a <5000 TL income showed more interest in these methods and that men showed more interest as their income level increased (>5000 TL). As a result, the ratio of men that used these CIM methods increased as their income level increased (Fig. 2).

Table 1 – The percentages of the CIM methods.

	Frequency (n)	Percentage (%)
Herbal treatments	40	9.4
Animal products	3	.7
Acupuncture	8	1.9
Psychoreligious methods	10	2.4
Manual therapies	6	1.4
Cupping therapy	18	4.2
Aromatherapy	4	.9
Healing waters	6	1.4
Other	1	.2
Combined	126	29.6
Total	222	52.2
System	203	47.8
Total	425	100.0

Download English Version:

<https://daneshyari.com/en/article/8457168>

Download Persian Version:

<https://daneshyari.com/article/8457168>

[Daneshyari.com](https://daneshyari.com)