

CAM in the treatment of cancer related symptoms: EPAAC preliminary data

Sonia Baccetti*, Elio Rossi*, Fabio Firenzuoli*, Valeria Monechi*, Mariella Di Stefano*, Maura Di Vito*, Tania Re*, Barbara Cucca*, Paolo Fedi*, Alberto Zanobini**

* *Tuscan Network for Integrated Medicine - Regional Health Ministry of Tuscan Region*

** *Department of Research, Innovation and Human Resources- Regional Health Ministry of Tuscan Region*

Presenting author: Sonia Baccetti sonia.baccetti@regione.toscana.it

Background: Tuscan Region Health Department has the duty to review the international literature on the use of Complementary and Alternative Medicine (CAM) in oncology as Associated member in WP7 “Healthcare” of the *European Partnership for Action Against Cancer* (EU Commission, 2009).

Aims: The main purpose of its participation in the project is to review the scientific literature on the use, efficacy, safety, toxicity and drug interaction of CAM (acupuncture and traditional Chinese medicine -TCM, herbal medicine and homeopathy) in the integrative care of cancer-related symptoms and also produce “Guidelines” where acupuncture, herbal medicines and homeopathic drugs, used in cancer care and analyzed in RCTs are listed according to a standardized grading scale (SIO 2009).

Methods: Electronic and manual search through MEDLINE (databases: PubMed, Google Scholar and EBSCO) on CAM commonly used in human cancer treatment; the period was from January 2003 to June 2013. Systematic reviews, meta-analyses and RCTs in English were included and used the following MeSH terms: Cancer Symptoms (anemia, anxiety, depression, cancer related fatigue, constipation, diarrhea, edema and lymphedema, hot flashes, insomnia, mucositis, nausea, vomiting, neuropathy, neutropenia, pain, radiodermatitis, xerostomia) AND type of CAM (e.g. Herbal Medicine/Phytotherapy, Homeopathy, Acupuncture and Traditional Chinese Medicine) AND Cancer or Oncology.

Among the RCTs, randomized double-blind trials versus placebo were preferred and were chosen those trials that specify sample size, recruitment criteria and analysis methods, dosage and timing of natural compounds, tests and statistical power of the study.

Results: The work is in progress and its results will be presented in the Congress. However, so far a support for efficacy (grading SIO 2009 1A,1B,1C) was found for the following symptoms: nausea and vomiting, pain, hot flushes and xerostomia for acupuncture; anxiety and depression, cancer related fatigue, diarrhea, hot flushes, nausea and vomiting and pain for herbal medicine, and menopause related symptoms, mucositis, and radiodermatitis for homeopathy. For the other symptoms the evidence for the validity of CAM is limited.

Conclusion: The literature data on the use of CAM in cancer care has greatly increased during the last years. This is also due to the shift from an alternative pattern to the integrative vision of these disciplines. Complementary therapies may play an important role in the integrated treatment and control of symptoms associated with cancer and cancer treatment.