



## Section on Complementary and Integrative Medicine



Spring 2009

### Notes from the Chair

By Kathi J. Kemper, MD, MPH, FAAP



Greetings! We have had a very productive period recently for our new Section. Highlights include:

**Publication of our Clinical Report in 12/08 in *Pediatrics*.** Publication occurred the same week as the CDC/NCCAM report on prevalence of CAM use in the US, so there was a lot of media attention to our report which had been many years in the making. I personally feel a sense of deep gratitude

to the members of the original Task Force on CAM for starting the project, and to Richard Walls, Sunita Vohra and Junelle Speller for ensuring that it was finished, reviewed, revised and finally published. See more below on media.

**Publication of AAP CAM brochure.** The patient education brochure is available at the [AAP Bookstore](#).

**CPS Natural Health Products statement.** We had planned to submit the Canadian Pediatric Society Statement on Natural Health Products to the AAP for endorsement immediately after our Clinical Report was published. However, the Clinical Report took a bit longer than anticipated, and now the CPS statement is several years old. We will wait for the CPS to revise/update its statement before submitting it for AAP endorsement. In the meantime, we've asked the CPS to endorse OUR Clinical Statement.

**The Integrative Pediatric poster** (talk with your doctor about ALL the therapies) is available on our Section web site.

Also, in December, Sunita Vohra and I attended the Dutch Integrative Psychiatry meetings in Groenigen to discuss holistic psychiatry. The psychiatrists held a special meeting to begin planning a Dutch counterpart to our integrative medical societies, and they wanted to learn from our pediatric example. Although we sometimes feel like we are just taking the beginning baby steps of our journey, it is nice to know that the progress we've made is already useful to those in other fields.

In February, I was invited to appear and submit testimony before the Senate Committee on Health, Education, Labor and Pensions (Senator Mikulski, Chair). Karen Hendricks kindly spent time meeting with me before the hearing to help polish and focus my testimony so we could better represent the unique interests of children.

In March, Hilary McClafferty represented our Section at the AAP Annual Leadership Forum (ALF). She has a separate column summarizing the meeting and providing some ideas for Section members to follow up.

March also saw balloting on our Section's bylaws. Next year we will start the election process. We will be gathering names for the nominating committee for the Section Executive Committee over the coming months. If you are interested in taking a more active role in the Section, please contact Junelle Speller or any member of the Executive Committee for more information.

Drs. Larry Rosen, Susan Hyman and yours truly continue to participate in telephone conferences to explore mutual interests between DAN! and AAP. As a result of these conversations, two of our Section members, Drs. Rosen and Mumper, have co-authored a piece on autism and GI disorders that is wending its way through the *Pediatrics* in Review (PiR) review process.

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## Letter from the Editor

### Section on Complementary and Integrative Medicine Executive Committee

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Dear Colleagues,

While preparing this issue I have, again, been amazed at the range and scope of activities developing in pediatric integrative medicine across the country. One of the best examples of progress in the field is seen at the program in Integrative Medicine at the Children's Hospital and Clinics in Minneapolis, led by Dr. Tim Culbert, who is featured in our member interview section this month. Another example of progress is outlined in my discussion with Joy Eberhardt DeMaster, a third year pediatric resident in Chicago who has found some successful ways to include integrative medicine into her training. I hope you enjoy reading about these two innovative colleagues, and find inspiration in their insights and creativity.

In March I had the opportunity to attend the AAP's Annual Leadership Forum (ALF), and was very encouraged by the open-minded reception I received from other AAP members as a representative of our Section. I enjoyed exchanging ideas with physicians from Sections and Committees as diverse as Perinatology, Emergency Medicine, Nutrition, Uniformed Services, Adolescent Medicine, Hospice and Palliative Care, and Cardiology, among many others. Attending the ALF this year reinforced my conviction that the principles of integrative medicine have the potential to be applied successfully in a very wide range of specialty areas, as well as in preventative medicine.

As you might imagine, the topic of health care reform was front and center during the forum. Now that opportunities for meaningful change in health care are presenting themselves, I join Kathi Kemper in encouraging each of you to further consider how you might continue to advance the field of pediatric integrative medicine in your practice or institution, and help position it more successfully in the mainstream of pediatrics. An important window of opportunity is opening for the field, and I encourage you to join the dialogue if you have not done so already.

With my best wishes,

Hilary McClafferty MD, FAAP



Joy Eberhardt  
DeMaster, MD

Kathi Kemper,  
MD, MPH

**Member Interview**  
**Timothy Culbert, MD, FAAP**  
By Hilary McClafferty, MD, FAAP

Tim Culbert, MD, FAAP has been the Medical Director of the Integrative Medicine Program at Children's Hospitals and Clinics of Minnesota, since 2001. He is board certified in pediatrics, developmental and behavioral pediatrics, and holistic medicine, and certified in medical hypnosis and biofeedback.

**HM: When did you initially develop an interest in Integrative Medicine?**

**TC:** I took a year off between medical school and my pediatrics residency, and had the opportunity to do research with Dr. Karen Olness. Her work in psycho-neuro-immunology was my first formal exposure to mind-body medicine, and this was a catalyst for me to learn more about the field.

**HM: Were you able to incorporate any complementary or integrative medicine into your pediatric training?**

**TC:** No, not in any formal way. After pediatric residency I completed a fellowship in developmental and behavioral pediatrics, where I developed my interest in non-pharmacologic methods of self-care for children with conditions such as ADHD, autism, and learning disabilities. I then practiced pretty conventional developmental and behavioral pediatrics for 7 years, until I decided I wanted to adopt a more holistic approach to medicine and offer more options to my patients. To help me make the transition, in 2001 I applied for, and was fortunate to receive, a medical fellowship award from the Archibald Bush Foundation, a local foundation that enables physicians to take a leave of absence from their practices to pursue new skills, retool, and receive leadership training. ([www.bushfellows.org/medical](http://www.bushfellows.org/medical))

The 18 months of the fellowship gave me time and support, in addition to my clinical work, to visit and learn from people like David Eisenberg and Kathi Kemper. I also planned and co-chaired the first national integrative pediatric integrative medicine conference, held in Tucson in conjunction with the University of Arizona, which was the precursor to the Pangea conference.

I decided to become certified in medical hypnosis and biofeedback, and ultimately sat for the American Board of Holistic Medicine boards to round out my credentials. Actually, there weren't that many people working with

complementary or integrative medicine in kids at that time, so I essentially tried to fill in the blanks for myself. By the end of the fellowship I had concluded that I wanted to incorporate much more complementary and integrative medicine into my daily work, and was happy to have the opportunity to join the team here as Medical Director of Integrative Medicine.

**HM: Was there a program in place when you got there?**

**TC:** An oncologist named Susan Sencer had started a small resource and research center about CAM in response to requests from her patient's families, and was coordinating some clinical massage and aromatherapy services for patients. Susan had been a Bush Fellow herself in 1999, and had used her fellowship year to study complementary and alternative medicine use in children with cancer. We built on what she had started and went from there. Acupuncture, nutritional counseling, and more varied mind-body services were the first things we added.

**HM: Did you need to recruit help, or were you able to use people from within your hospital system?**

**TC:** A bit of both. Some people were here and waiting for an opportunity to use their skills. Others ended up working here after visiting to observe our program model. We have actually had people come from all over the country, and from around the world, to learn about the program, which I find amazing.

**HM: What was your initial vision for the program?**

**TC:** I wanted to create a very strong team model. One of the first people I brought on was Lynda Richtsmeier Cyr, PhD. L.P., a pediatric psychologist who was a colleague from my prior practice. I confess I stole her! She specializes in chronic illness in children, and has extensive training and teaching experience in Mind-Body medicine. I also wanted it to be very clear that we were going to work in collaboration with other physicians, never in competition.

**HM: How do people access your services?**

**TC:** They are either referred from their primary care doctor, or can access us directly. People can see individ-



ual providers, but we are finding that our team evaluations are most popular. This is where children and their families talk to an integrative pediatrician and a psychologist, then after we come up with our recommendations the children choose from which therapies they want to try first. This has been very popular, and has worked well.

**HM: How do you structure those visits?**

**TC:** The initial visits are usually 60-90 minutes long, and the time is generally split between a medical and a psych evaluation. We spend a lot of time educating both children and parents about our services. Because see so many complex chronic disease patients here, we are also able to help with case coordination, and often help families prioritize and sequence therapies.

**HM: How has the reception been from other physicians in the hospital system?**

**TC:** It has been very good overall. I think a big part of our acceptance has been that we have very consciously taken a professional and evidence based approach to integrative medicine. We wanted other physicians to understand our services thoroughly, and have a feel for which patients might benefit from referral. I made a point of meeting individually with all the local pediatricians to talk with them about what we were doing. I called it 'academic detailing'.

Another reason I think we have been well received is that parents and physicians are searching for therapies that don't involve medicating children. There has been a huge backlash from over-prescribing medications in kids, and people want to reverse that trend. I consider it a nice endorsement, and a reinforcement of our credibility that we have now had referrals from every single sub-specialty department at the children's hospital. I find this very gratifying, and think it speaks to our commitment to maintain a very high standard of medicine.

**HM: I was reviewing your program website, and it is apparent you have experienced tremendous growth over the past few years.**

**TC:** Oh yes! We started with a fairly small inpatient service seeing a few patients per week, now we have a full time person on the inpatient service seeing anywhere from 6-20 children per day, and an outpatient clinic where we see 300-400 kids per month.

**HM: What are some of the factors you think led to such rapid growth?**

**TC:** We were very fortunate to have the strong support of Julie Morath, the hospital's Chief Operating Offi-

cer right from the get go. She had the vision for this program to succeed, and helped cultivate and nurture it along every step of the way. She helped raise awareness about the high demand for CAM services in the community, and brought attention to the fact that so many kids were using CAM already, it just wasn't realistic to ignore the field much longer. The hospital has also made a philanthropic investment in the program. We are not making money yet, but are looking forward to the day we are. We had to develop everything from the ground up in terms of coding, billing, filing insurance, and corporate compliance, and that has taken some time.

**HM: Are you getting pushback from insurance companies?**

**TC:** We find that consultations, biofeedback, and acupuncture generally go through the claims process well, sometimes we have difficulty with other therapies where there is less precedence for coverage, but I feel that is beginning to change, which I find very encouraging.

**HM: Is there a type of patient you have had exceptional success with?**

**TC:** Yes, we have had really excellent outcomes with patients who have chronic pain, anxiety and depression, sleep disorders, and encopresis. One of the main goals in treatment, as I mentioned, is to help kids get off of excess medication and we have had some great results.

**HM: I know you have been doing a lot of writing, what have you been working on lately?**

**TC:** Yes, I enjoyed working on the first three 'Be the Boss of Your Body' books. It has been very satisfying to get information out there that the kids can use directly. I recently added two books to the series, one on food and fitness directed toward overweight and obese children, and another on depression and handling emotions. On the academic side, I just finished co-editing a textbook called Integrative Pediatrics for the Oxford Press series The Integrative Medicine Library, whose senior editor is Andrew Weil. My co-editor Karen Olness and I just got word that the book will be out in August 2009.

I also helped write and design parts of our website especially for children, which I think turned out really well. There are videos of children both describing and receiving integrative therapies, as well as child friendly information for downloading. [www.childrensintegrativemed.org](http://www.childrensintegrativemed.org)

**HM: As you look at all the things you have accom-**

**plished there, what are you most proud of so far?**

**TC:** It has been very, very gratifying to get wonderful feedback in our patient satisfaction surveys. It is great to have satisfied customers, even though many of our patients have very difficult and complex illnesses. We get a lot of comments about how people have never had a healthcare experience like this before, and how much the kids like the feeling of participating in their own care. I am also very happy with the physical space we were able to create. Our clinic is a very calm and healing environment, for both the patients and the staff. We have a great team.

**HM: How do you think the field of pediatric integrative medicine is progressing at the national level?**

**TC:** Well, I think pediatrics is lagging behind in research funding and in good outcome studies, although I am starting to see that changing a bit. Advocacy has been good, with the efforts of people like Kathi Kemper and Larry Rosen of the AAP section presenting educational talks and doing presentations at the national AAP meetings. The recent technical report on CAM published in the December issue of Pediatrics was also a big step forward. We still need more research publications, and more CME directed towards pediatric integrative medicine.

**HM: Can you offer any advice for people just starting out in programs?**

**TC:** It has been extremely helpful to have a champion in the administration assisting us in explaining the purpose and services of the integrative medicine clinic to the hospital community and able to help with strategic planning.

I think it is important to have a good grasp of the current literature, and to be able to explain these therapies in a way that makes sense and reassures people. Health care providers and families appreciate the fact that we are using a balance of conventional and integrative therapies, not rejecting conventional medicine. I find that this is a very important message to convey clearly.

You also need to be able to explain the basis for the therapies to your colleagues who are your referral source, letting them know which therapies are useful and effective for specific illnesses. This educational process was time consuming initially, but has really paid off in the long run.

**HM: What are your next plans for the program?**

**TC:** We just hired a full time research coordinator and are hoping to show more outcome studies. We are

planning on expanding clinical services, and adding more nutrition services, acupuncture, and massage therapy. We are developing a week-long core training course for pediatric health care providers in integrative medicine, where they would come here and receive first hand exposure and training in integrative therapies.

We are envisioning collaborating with other sites around the country, creating sort of a mini internship in order to spread the model more effectively, and make training more accessible.

I have a vision for a national center for pediatric integrative medicine, and would love to have expanded research, education, advocacy, and clinical services here. I think it is time to have a national center to help the field of pediatric integrative medicine advance. Pediatric activities in integrative medicine have lagged well behind the adults in research, and it is time to change that.

**HM: Thank you very much for speaking with me and best of luck with your future plans! Any last thoughts or words of encouragement for our readers?**

**TC:** I would definitely encourage people to avail themselves of opportunities to acquire training in integrative medicine, and to take the initiative in championing the development of these services for children at their medial centers or clinics. There are many families searching for well- trained and well-rounded integrative practitioners, and I only see that demand continuing



## SAVE THE DATE

The U.S. presidential inauguration of Barack Obama will not be the *only* monumental event in Washington, DC! Be part of the largest pediatric delegation in history to attend the **American Academy of Pediatrics (AAP) 2009 National Conference & Exhibition (NCE)** at the Washington Convention Center, October 17-20! Free special events for conference registrants are happening Friday, October 16.

Learn more at [AAPexperience.org](http://AAPexperience.org).

## Focusing on: Physicians In Training

By Hilary McClafferty, MD, FAAP

Joy Eberhardt DeMaster, MD is a third year pediatric resident at Chicago's Advocate Lutheran General Hospital who just completed a month- long rotation at the American Academy of Pediatrics office in Washington D.C. She has a great interest in integrative medicine, and is looking forward to joining Virginia Garcia Memorial Health Center in the Portland Oregon area this summer after residency.

### **HM: Did you enjoy your rotation in Washington?**

**JD:** It was a wonderful experience! Every day was a new adventure. I had the chance to go to congressional hearings, summarize events, and write reports, sort of acting as the eyes and ears for the AAP office. The office there is incredibly supportive of residents on rotation.

The first week I was there the CHIP program (Children's Health Insurance Program) passed. I caught the tail end of the proceedings, and was lucky enough to watch the signing on television with the AAP staff. It was amazing to be involved in the excitement, and have the chance to see everyone celebrate after all the hard work that had gone into it. I also attended the hearings on health information technology, and participated in discussions about its implication for pediatricians.

One of the biggest highlights was the chance to meet Kathi Kemper, and attend the hearing on integrative medicine and health care reform. I appreciated the fact that Dr. Kemper took the time to talk with me and discuss her work. It was very unexpected to have a chance to meet her! It was also inspiring to have a chance to learn from Senator Barbara Mikulski as she led the integrative medicine hearing. She is a real proponent of involving integrative medicine in healthcare reform.

### **HM: When did your interest in CAM and integrative medicine begin?**

**JD:** I was raised in both the U.S. and Mexico, and had a lot of CAM exposure through my family. I entered medical training with a very open mind to CAM therapies. Interestingly, I found a similar open-mindedness at Loyola where I attended medical school. I had opportunities there which I realize now were pretty forward thinking, in that I had the chance to rotate in a sub-specialty clinic where conventional medicine and integrative therapies were offered side by side. Through that clinic I had exposure to acupuncture, clinical hypnosis, nutrition counseling, tai chi, and homeopathy. Very few members

of my residency group took advantage of that rotation.

### **HM: Did you have exposure to CAM and Integrative Medicine in your residency training?**

**JD:** At Lutheran there is actually a core group of people providing medical massage, chiropractic, homeopathy and yoga within the hospital system, and we do have a Complementary Medicine Department and a Wellness Center where people can go for integrative consults. Although I haven't had a chance to rotate through on a rotation, I have taken advantage of the massage therapists there to help manage the stress of residency training.

It has helped me come to realize that self-care for physicians and physicians is critical to them being effective care givers. I actually think a program in self-care should be a requirement during training. Although as a resident I feel I have a somewhat limited voice, I have encouraged others in my group to take advantage of the many resources here, and have started a practice of teaching relaxation skills to my team every Monday while on my pediatric wards month. Some of them get uncomfortable and think it is 'hocus pocus', but several have come up to me afterwards and told me these sessions have been very helpful.

### **HM: Looking back at your residency training, can you see where more CAM and integrative medicine training may have been beneficial?**

**JD:** Yes, in addition to the self-care skills I mentioned, I think learning more about how different cultures use CAM therapies would have been quite useful. We literally see patients from all over the world here, and it would have been very helpful to have more understanding about how various cultures approach health and healing. The other place that CAM and integrative medicine could have a place would be during patient rounds. It would have been great to have that added perspective on each patient's care, and I think the families would have appreciated it too. I also believe an emphasis on learning to really listen to patient's stories, and learning to be with patients 'in the moment,' should be more emphasized in medical training. I have learned that a physician can add so much just by their supportive presence.

### **HM: Do you anticipate incorporating CAM or integrative medicine into your new job?**

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## IOM Summit on Integrative Medicine

By Erica Sibinga, MD,MHS and Tim Culbert, MD

On February 25-27, the Institute of Medicine (IOM) convened a very exciting Summit on Integrative Medicine and the Health of the Public. In the revered National Academy of Sciences, a large and unusually diverse audience enjoyed presentations from a variety of esteemed speakers. Summit Chair and Chancellor Emeritus, Duke University School of Medicine, Ralph Snyderman, MD articulated a common theme of the conference: “What we have now is a ‘sick care’ system that is reactive to problems. The integrative approach flips the system on its head and puts the patient at the center, addressing not just symptoms, but the real causes of illness. It is care that is preventive, predictive and personalized.”

Presentations emphasized the importance of our health care system truly supporting wellness—physical, mental, and spiritual—for the benefit of patients and health care providers alike. Don Berwick, MD, MPP, FRCP, reminded us that wellness (in our patients and ourselves) is accessed and supported through engagement in meaningful relationships and experiences. Further, he offered an eight-point “Design of Integrative Care” which can be accessed on the IOM website. Mimi Guarneri, MD, FACC, spoke eloquently about the frustration of knowing that lifestyle modification would be preferable for her cardiology patients but are not supported through our reimbursement system when invasive procedural approaches are. Dean Ornish, MD, provided an inspirational and scientifically-driven review of the synergistic power of the integration of nutritional and lifestyle changes, while reminding us that, “Sustainable changes in lifestyle are based on joy, freedom, and pleasure.” A number of presenters discussed the importance of a rigorous evidence-based approach, but recognized the need to expand our methodologies to understand a much broader variety of types of evidence. Presentations and video are available on the IOM website (<http://www.iom.edu/?ID=52555>).

Suggestions were made on the enhancement of preventive strategies through structural changes including an expanded team approaches and innovative information gathering methods. There were a few comments explicitly related to the importance of early childhood and pediatric efforts. But more broadly, the emphasis on the integration of nutritional and lifestyle strategies with the intention of supporting wellness, relationships, and quality of life made it clear that adults and children alike would stand to benefit.

## Report on the 2009 AAP Annual Leadership Forum

By Hilary McClafferty, MD, FAAP



The AAP's Annual Leadership Forum (ALF) is a 3 day conference designed to allow members of the Academy from across the country to consider, discuss, and vote on a variety of resolutions directing the focus and course of the AAP for the upcoming year. The conference provides an important opportunity to share information about our Section with a broad cross-section of the AAP leadership. Interest in the many activities of the SOCIM was high this year, and many attendees were curious about how to incorporate complementary and integrative therapies onto their areas of practice.

Some impressions I shared with the other members of the executive committee after the conference included: a suggestion that our Section write a resolution proposal for next year's conference, suggesting that the Academy facilitate education for their members about evidence based integrative medicine modalities for children in both primary care and sub-specialty settings. This strategy has been used by other young Sections and Provisional Sections in the past, and is a way to help raise awareness about the specialty throughout the AAP membership.

Another suggestion was that Section members discuss the possibility of planning a small 1-day regional conference about pediatric integrative medicine topics using the direct sponsor guidelines and application through the AAP. This is a way for our Section to put on a conference with use of AAP planning resources (not money), and provides AAP endorsed CME. The application process is rigorous, but I think it is an idea worth considering.

I encourage you to communicate with fellow members of the AAP if you have research ideas that would benefit from an expanded scope, and to keep your individual State Chapter leaders updated on your activities and interests regarding the SOCIM.

## SOCIM CME Sessions at AAP NCE

By Lawrence Rosen, MD, FAAP

The SOCIM hosted its second Section program at the 2008 AAP National Conference and Exhibition in Boston. Approximately 100 learners participated in the moderated discussion on parent-pediatrician communication on the use of complementary and alternative medicine therapies for children with autism. Susan Hyman, MD and parent advocate, Barbara Byers, served as faculty.

The SOCIM also hosted the session, CAM for the Office, to present introductory level mind-body and self-regulation skills, including breathing techniques, imagery, self-hypnosis, and simple biofeedback. Drs Timothy Culbert and Lawrence Rosen served as faculty.

At the upcoming 2009 NCE in Washington, DC, the SOCIM will host two sessions:

Section on Complementary and Integrative Medicine Program, October 17, 2009 9:00 AM – 12:00 PM

Children are increasingly diagnosed with mental health disorders such as depression, bipolar disorder, anxiety and ADHD. Parents and pediatricians are seeking guidance regarding safe and effective complementary/alternative medical (CAM) therapies for these conditions. Dr. Kathi Kemper, Chair of the SOCIM and author of “Mental Health, Naturally”, will moderate a session on the integrative approach to childhood mental health disorders, joined by esteemed colleagues Drs Daniel Coury, James Perrin and Martha Herbert.

Replacing Pills with Skills: Safe and Effective Self-Care Techniques for Children with Common Sleep, Stress and Pain Complaints, October 18, 2009 4:00 – 5:30 PM

Recent surveys indicate significant increases in the use of psychoactive medications (including off label use) with children of all ages experiencing common sleep, stress and pain related symptoms. Parents are increasingly concerned about this trend and are very interested in safe, effective non-drug strategies that can be utilized by their children for managing these problems. Dr. Culbert and Ms. Kajander have many years experience in teaching holistic, evidence-based, safe self-care techniques to children and teens and will review these approaches through didactic, videotape examples and audience participation formats.

Finally, the SOCIM recently submitted the following proposals for consideration for the 2010 NCE in San Francisco:

Nutritional Supplements in Adolescence

Integrative Primary Care for Children with Autism: CAM within the Medical Home

Gastrointestinal Problems in Children with Autism Spectrum Disorder

Pediatric Office of the Future NOW: Greening Your Practice and Beyond

Section on Complementary and Integrative Medicine Annual Program

Update on the Use of Mind- Body Medicine in Pediatrics.

**Pangea**, the 6th Pediatric Integrative Medicine Conference, was held November 14-15, 2008 in New York City. Over 150 attendees, including international representatives from several countries, enjoyed practical and inspirational dialogue over the two-day conference. Keynote speakers Michael Balick, PhD of the Institute of Economic Botany and Roberta Lee, MD of the Beth Israel Medical Center led the prominent multidisciplinary faculty.

**SOCIM on the Web:** Visit <http://www.aap.org/sections/chim/>. The webpages include announcements, a current list of SOCIM references, and past presentations by members. Please forward your presentations, dates for speaking engagements, and published papers to post on the web pages. The web pages are public.

**AAP SOCIM Listserv:** All members of our section are eligible for participation in the SOCIM listserv. Content focuses on AAP section information as well as clinical, educational and research topics of relevance to the membership. Listserv participants' level of knowledge and expertise varies. The list is moderated informally by several members of the Executive Committee, and we encourage respectful, congenial participation on the list. To sign up, contact Junelle Speller at [jspeller@aap.org](mailto:jspeller@aap.org).

**The IPIM-Network:** The International Pediatric Integrative Medicine Network is a listserv independently moderated by me on behalf of the Integrative Pediatrics Council. With over 100 multidisciplinary members from across the world, the IPIM-Network provides a forum for clinical and cultural discussions, as well as for notices of educational and research opportunities through its partnership with the Canadian PedCAM network and the UK's CCTN listserv. To sign up, contact me at [ldrdoc@alum.mit.edu](mailto:ldrdoc@alum.mit.edu) or visit [www.integrativepeds.org](http://www.integrativepeds.org).

## CARE Program and PedCAM Network

Sunita Vohra, MD, FAAP

The team at the Complementary and Alternative Research & Education (CARE) Program ([www.care.ualberta.ca](http://www.care.ualberta.ca)) continues to coordinate the *Pediatrics in Review* series, including recent articles on the common cold (Dec 2008), fever (Feb 2009) and fish oils for neurodevelopmental disorders (April 2009). Later this year, articles will be published on melatonin, autism, and enuresis. There are an increasing number of new authors contributing to the series, and CARE appreciates their contributions.

The PedCAM network ([www.pedcam.ca](http://www.pedcam.ca)) continues to grow with more members both within Canada and internationally. PedCAM is currently redeveloping its website and the new website will include a searchable repository of articles related to pediatric CAM, so look for a fresh new look in Summer 2009! PedCAM is hosting a satellite meeting during the North American Research Conference on Complementary & Integrative Medicine in Minneapolis on May 12 titled "Building International Bridges", and we look forward to reporting on the meeting in the next newsletter.

## Pediatric Heroes: Champions for Children

In October 2008, we launched a campaign to find stories of the every day, unsung pediatric heroes among us. After receiving hundreds of entries and MUCH deliberation, four individuals were selected by the NCE Planning Group Executive Committee. The winners will be sent to the 2009 NCE in Washington, DC October 16-20. Watch for their stories in the NCE Preliminary Program, which will be featured in the June issue of *AAP News*.

Winners of the AAP 2009 National Conference & Exhibition (NCE) heroes award:

Scott Cohen, MD, FAAP, Oakland, CA  
Catherine Bartlett, MD, FAAP, Northampton, MA  
Joseph Peter, MD, FAAP, Crestview, FL  
Bhagwan Bang, MD, FAAP, Opp, AL

For details, visit <http://www.aapexperience.org/>

## Chair Notes, continued from page 1

We are finishing up applications for the 2010 NCE. That's right, the 2010! The AAP plans about 18 months in advance for the fall NCE meetings. The process is extremely competitive. Our Section is ably guided by Dr. Larry Rosen. If you are interested in preparing an application for a workshop, seminar or other session for the 2011 NCE, please contact Larry. It's never too soon to start planning, particularly if you are interested in collaborating with another Section, Council or Committee. Collaboration is a terrific idea!

*A note on media contacts.* As complementary and integrative medicine become even hotter topics for the media, you may be asked by a writer, blogger, radio or TV station to comment on pediatric integrative medicine. That is terrific! Please bear in mind that the AAP has very specific policies about how we identify ourselves to the media. If you are, please DO say that you are a Fellow of the AAP (FAAP). Unless you are basically reiterating something from one of our Clinical statements or PiR articles (which have undergone extensive peer review prior to publication), please DO NOT say you are a member of the Section. We need to be very clear to distinguish our personal/professional opinions from AAP positions, and it can be difficult for media to make that distinction. Once we say we have an official position within the AAP, it is way too tempting for the media to interpret what we say as an AAP official position. As always, I am very thankful to Junelle Speller and all the members of the Executive Committee for their wise and thoughtful contributions to the Section as a whole, for moving the topic of integrative medicine into the mainstream, and for all their efforts in co-creating a brighter future for children, their families and those who care for them. Looking through the newsletter, I think you'll agree that we are fortunate to have such dynamic and productive members. We look forward to hearing from you! Please let us know what YOU have been up to and what you see as the optimal future for our Section. THANK you for your support and presence.

## Physicians in Training, continued from page 6

**JD:** I hope to, yes. I am especially interested in learning more about homeopathy. I think it would make a great addition to my practice.

**HM:** Joy, thank you very much for your time. Best of luck in your new practice!

## AAP Introduces New Student Loan Consolidation Program

As the cost of higher education continues to rise, so does the amount of loan debt with which the average student graduates. In fact, many members of the American Academy of Pediatrics (AAP) emerge from medical school and/or pediatric residency with a balance of more than \$125,000 in student loans.

In response to our young members' request for assistance, AAP has partnered with the Student Assistance Foundation (SAF), to create a student loan consolidation program that features the simplicity of one loan, one lender, and one payment. SAF is a nonprofit corporation based in Montana dedicated to providing students with the knowledge and tools to finance and pursue their postsecondary education,

Our innovative program offers these benefits:

- Significant cost savings:
  - A 2% principal reduction on balances between \$12,500 and \$99,999 after the first on-time payment.
  - A 2.5% principal reduction on balances of more than \$100,000 after the first on-time payment.
- OR**
- A 1% interest rate reduction after 35 on-time payments.
- Plus, a 0.5 percent interest rate reduction for signing up for direct payment
- Fully automated, online account access.
- Flexible repayment plans, including deferment and forbearance options.
- Life-of-the-loan servicing.
- Exceptional customer service.

We have the done homework for you! All members, eligible medical students, and residents interested in more information should call (866) 869-0671, or visit the Web site at [www.aapstudentloans.org](http://www.aapstudentloans.org).



Kathi Kemper, MD, MPH, Wayne Jonas, MD, Director of Samueli Institute, Catherine Baase, MD, Director of Global Health for Dow Chemical Company, Mary Jo Kreitzer, RN, PHD, Director of the Program for Spirituality & Health at the Univ of MN, Brian Berman, MD, Director of the Program for Integrative Medicine at the Univ of MD, James Gordon, MD, Director of the Center for Mind Body Medicine in Washington, DC