

COMPLEMENTARY MEDICINE IN PSYCHIATRY

Dragan Babić^{1,2}, Mario Babić¹, Marina Ćurlin¹ & Darjan Franjić¹

¹Faculty of Health Studies University of Mostar, Mostar, Bosnia and Herzegovina

²Clinic for Psychiatry University Clinical Hospital Mostar, Mostar, Bosnia and Herzegovina

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SUMMARY

In recent decades, conventional medicine has begun to include natural remedies and spiritual therapy in the treatment of people with mental disorders, and in recent years, physicians and healthcare professionals more often refer to alternative and complementary methods in the treatment of mental disorders. Alternative medicine includes “other treatments” and a more suitable term would be complementary medicine which supplements the definition of conventional medicine accepted by the World Health Organization.

After the rise of pharmaceutical industry in the second half of the 20th century and significant advancement in the treatment of mental disorders, comes a period of disappointment and acceptance of the fact that synthetic drugs are not omnipotent and may have serious and unpleasant side-effects. Due to this fact, there is a growing interest in the treatment of mental disorders with the use of complementary methods. It is important to note that these methods are not a substitute for standard treatment procedures and their appropriate application does not diminish the importance of classical treatment of psychiatric disorders. Numerous patients refuse classical therapy and seek the help of complementary medicine methods.

It is therefore important for physicians and healthcare professionals to have knowledge of complementary medicine which is science based and advises on treatment methods provided they are scientifically justified.

Key words: *complementary medicine, psychiatry*

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INTRODUCTION

During our complete education, we learned from various professors and from various books in which it was written that mental disorders are treated with various biological, psychological and sociotherapeutic methods. In the last decades, “official psychiatry” increasingly began to include various methods of complementary medicine in treatment, which were also recognized by the World Health Organization (WHO). These are primarily natural remedies, spiritual therapy, acupuncture, yoga, chiropractic, bioenergy, kinesiology, but also some other methods. In the last few editions of the famous American psychiatry by Kaplan & Sadock “Synopsis of Psychiatry”, chapter 29 titled “Complementary and Alternative medicine in psychiatry” was covered, which describes 44 alternative and complementary methods in the treatment of mental disorders (Sadock & Sadock 2007). Some other books and scientific articles increasingly write about the scientifically based positive effects of complementary medicine on mental health as well as help in curing mental difficulties (Babić & Babić 2009, Sharp et al. 2018, Gray et al. 2019, Phutrakool & Pongpirul 2022). The medicine that we refer to alternative today is as old as the human race, and written documents about the method of treatment date back to 5,000 years ago. For

example, ancient Chinese and Egyptian history abounds with records of natural medicine – from herbal treatment to acupuncture, providing us with valuable information on human health care even today. For thousands of years, only natural remedies and alternative methods were available to people for a wide variety of psychological problems. Today, alternative medicine (AM) is a well-established term that includes other methods of treatment, apart from conventional, that is, official medicine. For this type of treatment today, a much more correct term is complementary medicine (CM), which complements official medicine, in ways of treatment, starting from different principles, but whose results and success are evidently positive and officially recognized by the WHO (Babić 2007). After the great rise of the pharmaceutical industry in the last century and significant progress in treatment comes a period of disappointment and acceptance of the fact that synthetic drugs are not omnipotent. There has been a growing interest in recent decades in the treatment of mental disorders with scientifically based complementary methods thanks to this fact. Today, CM methods are used by every second citizen of Europe and they are similarly widely available in other parts of the world where biomedicine is currently the dominant system of medicine. Citizens increasingly choose therapeutic approaches that they consider appropriate for maintaining good health and for preventing or treating

diseases, regardless of whether it is classical biomedicine or CM. As Europe faces an increasing number of challenges in the field of health care (for example, an aging population, resistance of microorganisms, chronic diseases, mental health problems, rising costs, etc.), it is very important that CM is fully integrated into the health care system of EU member states (Babić 2007, Babić & Babić 2009).

COMPLEMENTARY MEDICINE: PRO ET CONTRA

Using the benefits of numerous scientific discoveries, over the past century, the pharmaceutical industry has made significant progress and synthesized numerous, high-quality psychoactive drugs that have significantly accelerated healing and improved the quality of life of mentally ill patients. At the same time, in many developed countries, there is suppression and rejection of natural medicines and methods that have been available to people for thousands of years and whose efficiency and effectiveness are indisputable. Some people, especially the Chinese, have never stopped using herbal medicines in folk medicine, and in contrast to Western methods of treatment, they still use traditional recipes, often several thousand years old. Despite the increase in material well-being and the increasing success of medicine in recent decades, an increase in the frequency of mental disorders has been observed. The situation in psychiatry is such that better means of treatment are available than ever before, and knowledge about diseases, neither in quality nor in quantity, has never been wider. On the other hand, we have increasing expectations of the quality of health care and the dissatisfaction of psychiatric patients and their families, who strive not only for the disappearance of symptoms, but for the continuation of normal life in the family and community. However, due to frequent disappointments with synthetic drugs in recent years, especially due to serious and unpleasant side effects, and high prices, we have witnessed an increasing increase in complementary methods in the treatment of mental patients. Today, the worldwide trend of using complementary methods can no longer be ignored. From Canada and the USA, through a number of European countries to Israel and China, there are legal faculties that teach chiropractic, massage, acupuncture, homeopathy, iridology and many other types of complementary medicine. This is also favored by the doctrine of treatment of psychiatric patients, which in recent decades has been multidimensional and integral, which implies that several therapeutic procedures are used simultaneously in the treatment and that the treatment affects both the patient and the environment. Apart from the synthetic ones, the natural medicines that we prescribe play an increasingly important role, either alone or in combination with synthetic medicines. Dissatisfied with the possibilities offered by traditional medicine and synthetic drugs, many psychiatric patients seek help from

self-proclaimed healers who often have questionable knowledge and morals, exorcists, spell removers, herbalists and other various alternatives (Babić & Babić 2009). According to data from the WHO, in recent decades about 80% of people in the world rely on plants to meet their needs for better health, with the consumption of herbal medicines growing in the most developed countries such as Germany, France, Italy, Japan, Australia, and even the USA. Data show that more than 1/3 of the US population has tried a natural remedy at least once in their life, and it is estimated that “Americans” visit an “alternative medicine practitioner” as many as 425 million times a year, which is more than the number of visits to general practitioners. About 20,000 medicinal plants are used in the world, 1,100 of which have been well researched, and 250 types of medicinal plants are used to obtain modern medicines in medicine. According to WHO data, homeopathy is the second treatment method in the world in terms of number of users. In the European Union, there are about 145,000 double-educated doctors, that is, trained in conventional medicine and some kind of CM. In addition to the 145,000 doctors who practice CM, there are about 160,000 non-physician CM practitioners who practice the already mentioned CM models, but also other CM therapies such as aromatherapy, kinesiology, massage, reflexology, shiatsu, yoga, qi-gong, etc. CM offers approach to the whole person. CM treatments can be provided independently and/or complementary to approaches of conventional medicine. These models are mostly practiced in private practices. More and more CM practitioners regularly cooperate with practitioners of conventional medicine. While ideas about the legal work of alternative medicine practitioners in Bosnia and Herzegovina are still in their infancy, in developed European countries the state has prescribed the rules of the game: financing methods have been determined and it has been prescribed who can apply complementary treatment methods. There is an increasing number of reputable medical institutions around the world that offer an integrative and complementary approach to treatment with synthetic and natural medicines. Courses on natural and traditional methods of treatment appear in the curricula of many medical schools. Many natural medicines have already been synthesized by the pharmaceutical industry and are increasingly being tested in clinically controlled trials, which, in addition to their effectiveness, show that natural medicines also have side effects and possible interactions with synthetic medicines. There is no doubt that classical, school medicine arose from natural medicine, but during the past century it unnecessarily moved away from its source. The fact is that many commonly accepted medicines in official medicine were originally obtained naturally, not synthetically. In recent decades, there has been a gradual turnaround and a partial return to “mother nature” and the re-use of everything from nature that, despite the passage of a long time, has remained good. Numerous controlled clinical studies have shown, in some cases, greater effectiveness

of complementary methods compared to placebo, and equal effectiveness compared to some psychoactive chemical drugs. These have shown indisputable action, good tolerability, a known mechanism of action with very mild and rare side effects, and as such can be used in everyday practice in the treatment of mental disorders. Official medicine is overly subspecialized, sometimes even so much so that the person as a whole is often lost. Complementary medicine offers a complete program of treatment for some psychological disorders such as anxiety, depression, addictions, but there is no independent treatment for schizophrenia, in which, given the severity of the disease and the lack of quality studies on alternatives to conventional treatment, it is best to first seek conventional care a psychiatrist. After conventional treatment, a qualified complementary health practitioner may be consulted to determine if adding a complementary therapy to the treatment may be recommended. There is numerous evidence that complementary medication in addition to conventional treatment can contribute to reducing the dose of antipsychotics, accelerating the stabilization of the disease, prolonging remission as well as in the treatment of comorbid somatic diseases. According to the report of European Commission experts on the spread of complementary alternative medicine in Europe, as well as on its legal status, there are three types of countries. The largest part is located in the so-called monopolistic system, where only the practice of official, scientifically based medicine is allowed. There are countries with a tolerant system that only recognize official medical treatments, but their legislation also recognizes some types of alternative medical action. The third group of countries practices a mixed system, and in them people who have completed school or qualified courses in complementary and alternative medicine can treat patients completely legally. For many reasons, it is important that we adequately know scientifically based methods of complementary medicine and occasionally advise them. Those complementary treatment methods that have been proven safe, thoroughly studied, and their effects have been scientifically confirmed should be advised. These are not a substitute for standard treatment methods, nor does their appropriate application diminish the seriousness of the approach to treating schizophrenia. They should, with caution, be advised along with the therapy recommended by official medicine for people who do not like or hardly accept “chemical” drugs as a complementary therapy to standard psychoactive drugs. A new form of psychiatry, called integrative psychiatry, recommends the selective inclusion of elements of complementary and alternative medicine in practical treatment methods. Depending on the type and phase of the mental disorder or mental illness, the severity of the sequelae in the remission phase, the wishes and needs of each patient, the cultural characteristics of the environment in which they live, it is advisable to recommend some form of complementary therapy at some stage of the disease. It is certain that there are a large

number of patients who, in addition to the methods of official medicine and the listed complementary methods, can be helped by, for example, some kind of dietary and nutritional therapy, herbal therapy, manipulative therapy or, for example, energy therapy. If a properly treated mental patient goes to a bioenergetic massage, drinks an appropriate herbal medicine or a multivitamin preparation, it certainly cannot be harmful, and there is more and more evidence that this type of complementary therapy helps in treatment (Babić & Babić 2009, Lin et al. 2021, Corp et al. 2018, Saldana & Sandra 2018).

NATURAL REMEDIES USED IN THE TREATMENT OF MENTAL DISORDERS

For all natural medicines that are part of complementary medicine there are treatment indications, active substance, mechanism of action, drug dosage, and side effects, same as for classic psychopharmaceuticals. The most commonly used natural remedies are:

St. John's Wort – *Hypericum perforatum*

For about 2,400 years, it has been used in folk medicine to improve mood, relieve tension and insomnia, but also for psycho-neurovegetative stability. The main active ingredient of St. John's Wort is hypericin. It is recommended for the treatment of mild to moderate depressive and anxiety disorders, seasonal affective disorder, smoking cessation, treatment of menopausal depression, especially in people who do not like chemical drugs.

Valerian – *Valeriana officinalis*

Due to its effectiveness and popularity, it is known as “natural valium”, and the active ingredient is valproic acid, which successfully eliminates anxiety and insomnia by increasing GABAergic activity.

Ginkgo – *Ginkgo biloba*

In Western medicine, it is increasingly popular and is known as the “antidote for the fear of aging”. The active substance is glycosides (bioflavonides), which are strong antioxidants that slow down blood clotting, and glycolides that improve circulation and have a protective effect on neurons. It alleviates or eliminates the symptoms of dizziness, headache, impaired memory, poor concentration, insomnia, low mood, and feelings of anxiety and fear (Itil 2008). It is indicated in the treatment of dementia, depression, vertigo, migraine, and impotence of the vascular type.

Omega-3 - Fatty Acids

It is recommended as complementary therapy in addition to standard psychopharmacotherapy for various forms of

depression, but also in the treatment of bipolar affective disorder and schizophrenia, and for people who work in stressful conditions. The popularity of this preparation is based on the fact that the Eskimos, despite their extremely fatty food, are protected from heart disease because of polyunsaturated fatty acids known as Omega-3.

Coffee - Piper methysticum (Kawonorum)

The active substance is kavapyrones, which have an anxiolytic effect by increasing GABAergic activity and calming the mesolimbic system through dopaminergic and serotonergic neurons. In addition to eliminating anxiety, it improves mood and cognitive functions without developing addiction. It has recently been mentioned as an herbal superstar that could replace benzodiazepines (Bloomfield 1998).

Glycine

There are several studies showing that the non-essential amino acid glycine increases neurotransmitter activity and reduces negative symptoms of schizophrenia when used in conjunction with antipsychotic therapy, particularly haloperidol, thioridazine and perphenazine (Waziri 1996, Heresco Levy et al. 1999, Javitt et al. 1994).

Gluten

A diet from which gluten (from cereals) and casein (from milk) have been removed improves the condition in schizophrenics. Dr. Curtis Dohan and his followers, in three nutritional studies examined the connection between diet and mental illness, with the focus on schizophrenia. On a sample of 65,000 respondents in Papua, the Solomon Islands and Micronesia, they recorded only two cases of schizophrenia, while the expected number in the same sample in Europe would be as high as 130. This motivated them for more extensive research, which showed that these nations do not eat grains. More radical scientists believe that elimination of bread, rice, pasta, starch, and refined sugars can significantly help schizophrenics whose disease is not genetically determined (Potkin et al. 1991, Ross-Smith & Jenner 1980, Kelly et al. 2019).

SPIRITUALITY

Since the beginning of mankind, in addition to various somatic difficulties, man has also experienced various psychological disturbances such as fear, sadness, insomnia, and various forms of "madness". The level of medical knowledge at the time was insignificant. There was no explanation for the psychological disturbances but they were attributed to the action of "higher - spiritual forces" that governed the material world. Treatment was mostly done with black magic. At the time, it was recorded that in

addition to magic, non-scientific methods such as various herbs, mushrooms, alcohol, etc. were used in the treatment of mental disorders (Kecmanović 1991). The oldest medical cultures, due to the impossibility of explanation and insufficient evidence, recognize their Gods and Goddesses as the causes of illness and misfortunes, but also others - their protectors and helpers in the treatment and preservation of health (Škrobonja 2004). In the last couple of decades, in addition to the previously listed methods, spiritual therapy has been included in the treatment of mentally ill persons, so that with each individual patient we will use some method, some combination of the listed methods or all methods at the same time. Despite the extremely important role that religion and spirituality play in the life of the individual and this community, and despite the increasing scientific evidence of the positive effects of spirituality on mental health, it is usually not mentioned or only incidentally mentioned in psychology and psychiatry textbooks, this not only the case in our country but also around the world. Until recently, psychology and psychiatry mainly found their role of religiosity and spirituality only in the pathological, therefore the field of psychology of religion and its positive effects was neglected for a long time. In recent decades, in scientific psychiatry all over the world, and in our country, there has been a significant increase in the interest on the study of the positive effects of spirituality. Our psychiatrists and psychologists made their contribution in this field of research (Jakovljević 2007, Jakovljević 2008, Jukić 2005, Babić 2008, Dilber et al. 2016). In the Biblical sense, health represents the man's choice to choose God as the center of his life. At any time, any person has the freedom to choose and think about his life and live with God or without Him. Faith in God increases our choices for health. Even when a person is ill, he can decide that the central point of his life is not illness, but God, which opens the way to hope and salvation (Nikić 2005). Many people have always tried to overcome illness and restore physical and psychological balance and harmony through religious rituals and mystical experiences. It is well known that even the most educated or completely illiterate people in very unfavorable health situations when official medicine is powerless, go to various priests and witch doctors or shrines (Lourdes, Ostrog, Medjugorje...) to look for help, which they sometimes get. Most research has shown that going to church and belonging to a body of believers benefits health. In general, people who go to church have a stronger immune system than those who don't, which contributes to their overall health. In a 1997 report published in the *International Journal of Medical Psychiatry*, a study of 1,700 adults found that those who attend religious services have lower levels of interleukin-6, an immune substance that is prevalent in people with chronic diseases (Amen 2003). Research at Georgetown University in America on a sample of 91,909 believers showed that active religious life helps to prevent disease in 75 % of cases, these people

heal faster and live longer; people who attend church regularly are 50 % less likely to suffer from heart disease than religious abstainers; 53 % of religious people are less likely to attempt or commit suicide (Jerotić 2005).

Spirituality in the treatment of mental disorders

There is a lot of clear evidence on faith and spirituality and their positive role in the treatment of mental disorders. It is known that spirituality can help in the treatment of numerous neurotic and psychotic disorders as well as in the treatment of personality disorders, addictions or other psychological difficulties. There is no valid evidence that religion, if properly practiced, can lead to impairment of mental health in those who voluntarily choose this method of treatment, or that it can lead to deterioration in people who have certain mental difficulties. Spirituality helps in the treatment of depressive disorders (Jakovljević 2005, Jakovljević 1997). Spirituality helps us suppress negative and strengthen positive emotions, strengthen psychological stability and thus overcome various psychosomatic diseases alongside other forms of therapy. Through religion and prayer, we cultivate our emotions and refine our emotional life, and directly influence the course of psychosomatic diseases (Jerotić 2005).

ACUPUNCTURE

In most European countries, acupuncture is now a recognized medical method and is included as a study course at some medical faculties (Babić 2018). The WHO recognized and equated acupuncture with all recognized treatment methods in 1979 and recommends it as the method of choice in the treatment of about forty diseases. This especially applies to painful conditions where there is no organic damage and where the pain is of functional nature. In psychiatry, it is recommended for the treatment of: anxiety, depression, insomnia, neurasthenia, dissociative disorders, anorexia, schizophrenia, addiction, and obesity. Results of several professional and scientific articles and experiences from the clinical field confirm the effects of acupuncture needles with the humoral theory, that is with the increased secretion of hormones, neurotransmitters and analgesic substances, and some studies show fewer side effects in the treatment of anxiety disorders than with conventional therapy (Amorim et al. 2019, Mallory et al. 2016). It is a safe method if performed by trained experts (Kecmanović 1991).

CONNECTION OF CLINICAL EMPATHY AND COMPLEMENTARY MEDICINE

In recent decades, the psychiatric profession has made great progress and better professional help is available to people with mental health disorders. As a result of high-

quality psychopharmaceuticals, psychotherapeutic and socio-therapeutic methods, success in treatment is rising. However, there are always individuals who, for reasons known to themselves, are reluctant to accept classical treatment methods and seek natural remedies. That is why it is important that all doctors, and especially psychiatrists, understand that the WHO has accepted the methods of complementary medicine and that it is desirable for them to be aware and on occasion apply them adequately. If they are exclusive and do not show clinical empathy towards such patients, the success in treatment will certainly be lower. If we understand and accept that people who know and are trained in complementary medicine can help and make the treatment more successful, this will have a positive effect on our patients. Clinical empathy includes communication with the patient in order to understand their perspective on the disease, medication, and overall health. The key in earning patient's trust is to respect them, which includes their beliefs, perspective, opinions, and feelings. In the last few decades, the healthcare system has seen a clear and constant move away from the paternalistic model of care where the healthcare worker dominates the decision-making process. Today, the patient is placed at the center of the therapeutic relationship, where a common decision-making model is emphasized. The aforementioned model of care is focused on the patient, and the basis of such a model is empathy. Doctors, nurses, and all other healthcare professionals are expected not only to provide competent treatment, but also to care for their patients in an empathetic and compassionate manner. Listening and engaging with patients' experiences and feelings takes time, and research has shown that doctors who spend more time with their patients are perceived as more empathetic. In addition to time, empathy in the healthcare system also requires material support. Resources are needed to enable healthcare professionals to reflect on their own feelings as a way of strengthening and maintaining the capacity for compassion (Neuman et al. 2011, Kerasidou et al. 2016). Clinical empathy is the key in doctor-patient interaction and implies adequate communication with patients in order to understand their perspective on illness, treatment and overall health. Ultimately, clinical empathy helps build patient respect necessary for better success. The key to earning patient's trust is respect, which includes his beliefs, perspective, opinions, and feelings (Babić & Barbarić 2022). Empathy in the doctor-patient relationship should be a natural standard. Empathy gap and problems in the relationship may arise from the personality characteristics of the doctor or the patient, but it seems that they primarily arise from the fact that the doctor is a direct witness of the patient's illness, fear, insecurity and vulnerability, feelings that slightly destabilize the ego and threaten the fundamental narcissism (Glavina 2022). Clinical empathy in medicine and especially in psychiatry, has a cognitive component. In the meeting with the patient, it directs our attention and becomes an important therapeutic tool. According to Bordin, therapeutic alliance

can be defined through three components: a connection between doctor and patient, agreement on tasks that lead to improvement of the health condition and as agreement on the therapeutic goal. Empathy has a therapeutic effect, it reduces the patient's anxiety, the patient becomes more cooperative, and treatment outcomes are better. Clinical empathy and a good therapeutic alliance are mutually beneficial. For therapists, a good therapeutic outcome has been proven to reduce the risk of developing burnout syndrome at work (Lasić & Mastelić 2022). In recent years, a great deal of interest towards spirituality can be found in medicine and particularly psychiatry. There is a large number of scientifically substantiated facts about the positive effects of spirituality on the healing and recovery of patients. Spirituality cannot be excluded from the overall human existence because, in addition to the psychological and physical dimensions, it forms the whole a human being. The strength of human spirituality is in the acceptance of illness and suffering as a means to achieve the spiritual growth and self-transcendence. Finding meaning is the individual responsibility and life task of every individual. Psychiatry, religion and spirituality do not need to be separated because they complement each other. Spirituality is an essential component of human life and should not be neglected during psychiatric treatment (Vuksan-Ćusa & Vuksan-Ćusa 2022). Kinesiology is a unique specific approach to client, health and wellness. At a subconscious reflexive level, a "muscle response test" is applied to get feedback from the body. In response to mild pressure, a contracted muscle is seen as a positive response to an "incoming stressor" such as an assertion, memories, food, or an educational activity. A weak or uncontracted muscle indicates a negative response, a lack of ease. Applied kinesiology was first developed as a therapy in the 1960s by Dr. Joseph Goodheart, and was supported by the research of about 18 other chiropractors. One of them, Dr. John Thie, offered the direction of kinesiology called Touch for health, as a branch of applied kinesiology. From there, kinesiology developed as an independent therapy. During a kinesiology session, the mental, chemical, physical, energetic and environmental aspects of the problem are treated simultaneously. Kinesiology offers a selection of techniques and preparations from chiropractic, traditional Chinese medicine and other sources to support healing (Babić 2008). Several studies have been conducted at our university in which the positive impact of exercise on health has been proven (Katić 2018, Babić 2018, Lukanović 2020, Markotić 2020).

CONCLUSION

Due to the growing interest of the public in complementary treatment methods as well as some evidence of their therapeutic effectiveness, it is necessary that doctors and other experts in the field of mental health not only know about them but also advise them appropriately. We

recommend complementary treatment methods that are proven to be safe, thoroughly studied, and with scientifically confirmed effects. They are not a substitute for standard treatment methods, nor does their appropriate application diminish the seriousness of the approach to the treatment of mental disorders. They should, with caution, be advised and applied along with the therapy recommended by official medicine for people who do not like or have a hard time accepting "chemical" drugs as a complementary therapy to standard psychoactive drugs and other common treatment methods. It is necessary to continue research and fully shed light on the effectiveness and mechanism of action of complementary and alternative treatment methods.

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Contribution of individual authors:

Dragan Babić: writing manuscript, concept and design of the manuscript, literature searches, approval of the final version. Mario Babić, Marina Ćurlin & Darjan Franjić: comments on the concept of the manuscript, literature appraisal, approval of the final version, English proofreading.

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Correspondence:

Academician, professor Dragan Babić, PhD
Faculty of Health Studies University of Mostar
Clinic for Psychiatry University Clinical Hospital Mostar,
88000 Mostar, Bosnia and Herzegovina
E-mail: dragan.babic@fzs.sum.ba