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*North American Research Conference on*

# COMPLEMENTARY & INTEGRATIVE MEDICINE



## POSTER PRESENTATION ABSTRACTS

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**METHODS:** Eleven healers from traditions that claimed to be able to heal at a distance and in sensory isolation from the recipients were recruited from the Big Island of Hawaii. Healing modalities included Qi Gong, Reiki, traditional Hawaiian healing (Kahuna), Healing Touch, Peruvian/Brazilian shamanic healing, prayer, vibrational healing, and various eclectic types of distant healing. Each healer was paired with a person with whom they felt a special connection, and who served as recipient of the distant healing intentions. The recipient was placed in the MRI scanner and isolated from all known forms of sensory contact from the healer. The healer was instructed to send healing to the recipient in a manner that reflected their own practice. Healing was sent at random 2-minute intervals in a sequence that was unknown to the recipient. Scans were acquired using brain oxygenation level dependent (BOLD) functional technology and analyzed with FSL software. 3D moving images were created using a novel MeshGrid data representation software designed for this study. MeshGrid allows the display of multi-resolution, time-varying 3D data and supports 3D morphing with topological changes.

**RESULTS:** Significant changes were found in 9 of the 11 healer/recipient pairs. Brain areas that were significantly activated included cerebellum, anterior cingulate cortex, thalamus, and hippocampus.

**CONCLUSIONS:** Distant healing, as measured by fMRI scans, can be correlated to changes in brain function of individual recipients, when recipients are sensory isolated from the healers and unaware of the On/off sequencing of the healing.

FRIDAY, 5:45-6:30 PM

B32

Anca MH, Kerten A\*

Gyro-Kinetics: a preventive rehabilitation method in Parkinson's disease.

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**OBJECTIVE:** To assess the effect of Gyro-Kinetics, a complex rehabilitation program on Parkinson's disease in an open label pilot study.

**BACKGROUND:** The management of Parkinson's disease (PD) aims to improve quality of life by preventing and reducing the multiple clinical disabilities. The oscillatory human basal ganglia activity focuses on the effect of voluntary movement that, similar to levodopa, could change the synchronization of neuronal discharge and improve the bradykinesia. Several reports showed an improving effect of music therapy and physical training on motor performance in PD. Gyro-Kinetics (GK) is a rehabilitation method that combines movement, touch and music to restore the physiological balanced state on physical, mental and emotional levels. It has been successfully used in several conditions: movement disorders, musculoskeletal, vascular, respiratory and digestive disorders, ADHD.

**METHOD:** Our pilot study lasted 3 months. It consisted of weekly session of GK in 11 PD patients (7 males) with mean age of 63 ± 9.9 years, mean disease duration of 3.9 ± 2 years and Hoehn and Yahr stage 1 to 3. Only 4 patients received levodopa as a previous therapy. No drug changes were made during the study period. The disease severity was assessed by a neurologist using UPDRS motor score, ADL score and CGIC. The assessment was done monthly, at baseline and final visit, pre and post training session and once during the second month. The CGIC was done each session.

**RESULTS:** All patients finished very satisfied this study. GK had a significant immediate post session but also long standing improving effect on motor parameters: baseline UPDRS improved ( $P = .004$ ) in all patients after the training session and remained improved for 1 week, between 2 sessions ( $P = .13$ ). Remarkable immediate improvement was seen in: hypomimia ( $P = .002$ ), hand alternated rapid movements ( $P = .004$ ), speech, tremor at rest, bradykinesia, gait and mood. The patients reported improvement of their breathing and constipation problems. The ADL improved from baseline to the last visit ( $P = .09$ ). Nine patients (81%)

reported clear improvement on CGIC ( $P = .01$ ). Two patients with advanced disease did not improve but remained stable.

**CONCLUSION:** GK seems to be effective on general motor and mood dysfunction in PD. It also can improve the respiratory and gastrointestinal disturbances and the patient awareness of his disease. The combined modalities of GK prove a higher effectiveness and usefulness in the early stages of the disease in order to prevent the later complications. Further controlled studies are desirable.

FRIDAY, 5:45-6:30 PM

B26

Balneaves LG, Ohlen J, Bortorff JL, Brazier A.

CAM decision-making by individuals living with cancer: the role of social networks.

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**BACKGROUND:** Decision-making research in the context of CAM and cancer care has focused primarily on cancer patients' experiences. Research is needed that examines the social context in which these treatment decisions occur, specifically the influence of family members and significant others in the decision-making process.

**PURPOSE:** To examine how social networks, including family members and significant others, become involved and impact the CAM decision-making process of people living with cancer.

**METHODS:** This qualitative study involved 28 family members and significant others who were identified by breast and prostate cancer patients as being involved in their CAM decision-making process. In-depth interviews were conducted and transcribed verbatim. Thematic and open coding was initially conducted, followed by a constant comparison of the data.

**RESULTS:** Family members and significant others were found to take on a variety of different roles in supporting cancer patients' decisions about CAM, including being an "interested bystander," "collaborator," "information gatherer," "advisor/director," or "active listener." How involved each patient's social network was in CAM decisions was based on several factors, such as attitudes towards CAM, the CAM resources available, and the nature of the relationships in the social network. Social networks were found to influence patients' CAM decisions by "creating safety," "pushing to use," "putting on the breaks," or "making the decision."

**CONCLUSION:** Social networks play a central role in cancer patients' decisions about CAM. Supporting not only the patient, but also family members and significant others, in accessing credible and evidence-based information about CAM is essential to ensure informed and safe decisions about CAM.

FRIDAY, 5:45-6:30 PM

B14

Benn R, Moura V, Sill M.

Mind-body skills for women with a history of abuse: a pilot intervention study.

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This study used a mixed method design to examine the effects of a 12-week intervention program for women with a history of emotional, physical and/or sexual abuse. The primary purpose of this study was to determine if participation in a group-based program using mind-body skills techniques resulted in improvements in psychological functioning and quality of life when compared to a wait-list control group. A secondary purpose was to describe the longer-term (ie, 3 months post-intervention) qualitative impact of this experience. The Mind Body skills intervention program was modeled Dr James Gordon's mind-body-skills professional training program. The program consists of 12 weekly 2-hour sessions where participants learn, practice and discuss various techniques of mind-body medicine (eg, guided imagery, meditation, breathing, artwork, jour-