



## Presidential Perspectives

# Parsley, sage, rosemary, and thyme

If you speak with anyone who likes to cook, they may tell you that there are certain herbs that they always have on hand such as parsley or thyme. They could also tell you that of late they have been using some new ones with more regularity. The trick is finding the ones that go well together, creating a better end result in the kitchen.

As physicians, we have the opportunity to do the same kind of thing in our offices—particularly when we are informed and aware of complementary and alternative medicines (CAM).

Whether we like it or not, many of our patients are taking or using complementary medicines or alternative therapies, everything from naturopathic medicine to tips from Dr. Andrew Weil's Integrative Health Program, herbs to homeopathy, essential oils to acupuncture. Four out of every 10 patients are supplementing their own health care. In 1997, visits to CAM practitioners exceeded visits to primary care physicians by more than 243 million.

Some patients are using these treatments and *not* informing their physicians about what they are taking. Guided by the health food store sales clerks, others are buying, mixing, and matching things that may or may not react well with what medications they are already taking.

**Patients** may be unaware of the effects of combining these with their prescribed medicines. Their unsupervised complementary treatment may actually be causing symptoms or having adverse side effects, complicating another disease state that already exists. **Physicians** may be unaware of what is really going on because the patients feel we know little about alternative medicine, fear talking to us about their usage because we might belittle them, or we fail to ask about CAM. Often patients do not even think to mention

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medications prescribed from other physicians, let alone “natural” therapies they are using. Osteopathic family physicians should avoid this failure to communicate at all costs.

We should know enough about natural herbs, vitamins, and alternative medicines for counseling patients. As family physicians, we need to be informed so that we know which ones to ask our patients about, prompting them rather than waiting for them to remember that they have an herbal supplement every morning with their vitamins.

We need to be open to the idea of our patients using these medicines to ensure that we do not frighten our patients into *not* telling us they are using them, thereby resulting in harm. We need to be informed enough so we can counsel and provide advice that the patient will understand and on which they can take action. Articles are available in medical journals and information is readily found on websites such as the National Institutes of Health (<http://www.nih.gov>) and Medline Plus (<http://www.medlineplus.gov>). The reality is our patients are seeking and using these modalities. Our knowledge of the treatments accompanied by awareness of their usage will improve patient care and safety.

I am not advocating for osteopathic family physicians to embrace CAM treatments. Evidence-based research is being conducted on much of CAM to see if there is a benefit or risk to them. But as responsible physicians, we need to become aware of the various forms of alternative and complementary treatments.

So, like anyone who enjoys the magic that can be done in a kitchen, our understanding of alternative and complementary medicines and which of our patients use them, as well as our ability to communicate with our patients about what really complements and what most definitely does not, can only help us gain a better end result in our offices when looking at our patients' health.

Osteopathically Yours,  
Jan D. Zieren, DO, MPH, FACOFP dist.