## Adults, Children Turn to Alternative Pain Therapies

BY MARY ELLEN SCHNEIDER

New York Bureau

bout 38% of adults and nearly 12% of children in the United States used some type of complementary or alternative medicine therapy in 2007, according to survey data released by the Centers for Disease Control and Prevention and the National Institutes of Health.

Adults primarily reported using complementary and alternative medicine (CAM) therapies to help manage chronic pain such as back, neck, or joint pain, as well as arthritis. Among children, the most common reason for using CAM

Adults primarily reported using CAM for chronic pain such as back, neck, or joint pain, as well as arthritis; in children, the most common reason for using it was back or neck pain.

therapies was back or neck pain. However, children had a greater variety of conditions being treated with CAM than did adults, including head and chest colds, anxiety and stress, insomnia, attention-deficit/hyperactivity disorder, and musculoskeletal complaints.

"Although children and adults are using CAM at high rates, the types of therapies they use and the conditions for which they are using these therapies differ," Richard Nahin, Ph.D., acting director of the division of extramural research at the National Center for Complementary and Alternative Medicine, part of NIH, said at a press briefing.

The survey data come from the 2007 National Health Interview Survey and include information on the use of CAM from more than 23,000 adults and 9,400 children. Officials at the CDC, which administers the survey, first collected data on CAM use in adults in 2002. This is the first time that information was collected about use by children.

In adults, the percentage of Americans using CAM appears to be holding steady, said Dr. Nahin, who coauthored the report on the survey data. In 2002, about 36% of U.S. adults reported using some type of CAM therapy, compared with about 38% in 2007.

Although the use of CAM in children seems much lower than in adults, that likely reflects the fact that adults have more health care needs, Dr. Nahin said. Children were five times more likely to use CAM if a parent or another relative also used CAM, according to the report.

For adults and children, natural products, including herbal medicines and dietary supplements, were the most commonly used CAM therapies. For adults, some of the most common natural products were fish oil, glucosamine, echinacea, flaxseed oil or pills, and ginseng.

Other popular CAM therapies used by adults were deep breathing exercises, chiropractic manipulation, massage, and yoga. For children, the most common natural product was echinacea, followed by fish oil, combination herb pills, and flaxseed oil or pills, as well as chiropractic manipulation, deep breathing exercises, yoga, and homeopathic treatment.



For both adults and children, natural products, including herbal medicines (shown here) and dietary supplements, were the most commonly used CAM therapies.



BANZEL™ is indicated for adjunctive treatment of seizures associated with Lennox-Gastaut syndrome in children 4 years and older and adults. Important Safety Information

Antiepileptic drugs (AEDs) increase the risk of suicidal thoughts or behavior in patients taking these drugs. Patients should be monitored for the emergence or worsening of depression, suicidal thoughts or behavior, or any unusual changes in mood or behavior.

Use of BANZEL has been associated with central nervous system-related adverse reactions, such as somnolence or fatigue, coordination abnormalities, dizziness, gait disturbances, and ataxia.

BANZEL is contraindicated in patients with Familial Short QT syndrome. These patients should not be treated with BANZEL. Caution should be used when administering BANZEL with other drugs that shorten the QT interval.

As with all AEDs, BANZEL should be gradually withdrawn to minimize

the risk of increased seizure frequency. Multi-organ hypersensitivity syndrome has been reported in association with BANZEL therapy. In clinical trials, hypersensitivity reactions occurred mostly in the pediatric population and usually within 4 weeks of starting BANZEL therapy. If this reaction is suspected, BANZEL should be discontinued and alternative treatment started. All patients who develop a rash while taking BANZEL must be closely supervised.

In all patients with epilepsy treated with BANZEL in double-blind, adjunctive therapy studies, the most commonly observed adverse reactions were headache, dizziness, fatigue, somnolence, and nausea.

Please see the brief summary of Prescribing Information on the following page.



Visit www.BANZEL.com for more information.

©2008 Eisai Inc. All rights reserved. RUF000067 December 2008
BANZEL" is a trademark of Novartis Pharma AG, used under license.
Manufactured by Eisai Co., Ltd. Marketed by Eisai Inc., Woodcliff Lake, NJ 07677