health

As soon as you step into New York's new Beth Israel Center for Health and Healing, you realize you're in no ordinary clinic. Rather than entering a bland professional foyer, you come into a light, airy space with gurgling fountains and leafy greenery; the waiting area has recycled Brazilian cherry wood furniture instead of the usual grimly indestructible plastic seats. The recent opening of the 13,000-square-foot offshoot of Beth Israel, one of the nation's major teaching hospitals and a pioneer in incorporating unorthodox treatment into care, symbolizes the dramatic changes taking place in medicine today.

Once the province of hippies and Californians, alternative treatments like herbal remedies, meditation and acupuncture now are embraced by the mainstream. "Ten years ago, the idea of a holistic hospital would have been inconceivable," says Woodson Merrell MD, the new center's director and a leading specialist in integrative medicine. "If I had suggested introducing acupuncture into a hospital like Beth Israel then, they would have laughed me out of the building." But public demand for complementary and alternative medicine (CAM) has made hospitals take note: Similar divisions exist or are being opened at powerhouses like Columbia-Presbyterian, UCLA, Memorial Sloan-Kettering Cancer Center, Cedars-Sinai, Beth Israel Deaconess and the Mayo and Scripps clinics.

Of course, hospitals aren't blind to CAM's moneymaking potential. "The reason Scripps created a center [of this kind] was because our patients were going out and getting these services anyway," explains Mimi Guarneri, medical director of the Scripps



Western Medicine is finally taking complimentary therapies seriously.

Center for Integrative Medicine. "Twenty-seven billion dollars per year is being spent out of pocket on stuff like vitamins, acupuncture, herbal medicine and magnet therapy." Innovation isn't restricted to medical giants, either: 25 percent of inner-city hospitals offer CAM to patients, according to statistics from the consulting firm Deloitte & Touche.

Insurance companies also are jumping on the bandwagon. Oxford Health Plans introduced its alternative-medicine network two years ago; today it includes more than 5,000 practitioners. In addition to satisfying demand, insurers also are looking to CAM to cut costs in treating some chronic conditions. Asthma, for instance, requires expensive medications. Since patients' low co-payments don't cover these expenses, companies are looking for cheaper natural solutions. "The cost of many conventional drugs and treatments has become prohibitive, whereas complementary medicine is relatively low-tech, inexpensive and, on the whole, does not include such severe side effects," says Michael McIntyre, chairman of the European Herbal Practitioners Association and founder of the European Journal of Herbal Medicine.

In July, holistic treatment received the stamp of approval from one of the most powerful organizations of all: the federal government. President Clinton announced the appointment of James Gordon MD, director of the Center for Mind-Body Medicine in



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Washington, D.C., as chairman of the White House Commission on Complementary and Alternative Medicine Policy. The commission's purpose is to provide an official report on legislative and administrative initiatives that would maximize CAM options for all Americans. "Almost half of all Americans implement some form of complementary and alternative medicine as a part of their healthcare," Gordon says.

Integrative centers such as Beth Israel's aim to draw upon all schools of medicine—conventional and alternative—to find the best treatment. "Some conditions are ameliorated by alternative medicine in a way that Western medicine has not been able to do," says Merrell. These include chronic illnesses like arthritis and irritable-bowel syndrome. Patients with more serious diseases also are turning to CAM: In a recent study, Gordon found that 69 percent of all cancer patients are using alternative therapies and that 74 percent are interested in learning more about them. But Barrie Cassaleth, chief of the integrative medicine service at Sloan-Kettering and author of *The Alternative Medicine Handbook* (W.W. Norton & Company), warns that people shouldn't expect too much. "When it comes to oncology, alternative treatments are largely unproved and can be invasive and toxic," he says. "The services [we offer] are not cures but aim to enhance quality of life, reduce symptoms and relieve stress."

Because of the lack of definitive studies proving that CAM treatments have altered the progression of disease, many in the medical community are still skeptical about their effects. But that's exactly why supporters feel it's imperative for academic hospitals like Beth Israel to get involved. Rather than just meeting consumer demand, the center also will focus on research. "The education department will be closely linked to the medical center," Merrell says. "We will compile data on the effects of alternative remedies—both clinical and lab studies—and everything will be computerized in order to provide a resource for insurance companies, as well as students."

Beth Israel's Center for Health and Healing was conceived as an environment where doctors, practitioners, academics and patients all can work together comfortably. Designers Rita Shulsky and the architecture firm Architecture and Furniture—experts in interiors free of toxic chemicals—put in features like a yoga and tai-chi room, recycled wood furnishings and an air-filtration system to remove contaminants. "Environmental issues play a large part in the center," says Merrell. "There's lots of light, color and space, thanks to floor-to-ceiling windows and opaque glass instead of walls. It's not a conventional hospital, in that there's a flow that moves through the center." Feng-shui master Alex Stark came to consult and added healing elements like plants and water.

For now, the center is operating only on an outpatient basis; walk-ins and referrals are welcome. (Many of its doctors also have private practices, and medical insurance is accepted.) After a patient gets examined and diagnosed, he or she will be prescribed treatment from conventional medicine, along with remedies from any of six fields: homeopathy, herbal/botanical, acupuncture, nutraceuticals, mind/body therapy (e.g., meditation, hypnosis) and manipulation (e.g., cranial osteopathy, Alexander technique). The staff also includes holistic nurses and practitioners like chiropractors and acupuncturists. Because herbal supplements are not regulated by the FDA, employees can give advice about reputable brands and stores. But the center cannot have an on-site shop, since the American Medical Association has deemed it unethical for physicians to sell supplements out of their offices.

While Merrell is thrilled about his opportunity to introduce CAM to a respected institution like Beth Israel, his excitement also stems from his unique background. Raised by parents who were homeopathic doctors, Merrell grew up with an interest in medicine and a passion for yoga and meditation. After attending Columbia University medical school, Merrell traveled in Asia, where he decided he wanted to blend Western science and Eastern philosophy. For the last 12 years in his practice, he has been incorporating acupuncture, homeopathy, botanicals, nutritional therapies and mind/body techniques (he also teaches courses in CAM at Columbia).

But rather than seeing his work with Beth Israel as a culmination of his efforts, Merrell chooses to view it as the start of a seismic shift in medicine. His colleagues are equally optimistic. "Within five to 10 years, complementary therapies will be part of the care in every major hospital and clinic, and our definition of medicine will be far larger," says Gordon. "The questions are not if or when this will happen. The questions are: Which of these therapies are effective, how can clinicians be trained in using them and have the public educated about them, and how can the effective therapies be safely integrated into comprehensive and humane care for all Americans."

If the interest in CAM continues to grow, this area might be so mainstream that it will need a new name—it will be neither complementary nor alternative. "I am sure in time it will be regarded as the medicine of first choice," . predicts McIntyre, "and drug treatments will be used when complementary medicine has proved ineffective." •

