

More white Americans turn to lower-cost alternative meds

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The use of complementary and alternative medicine (CAM) therapies experienced a significant growth in the United States in the last decade, and a new analysis finds that CAM use becomes more likely when access to conventional care has been restricted.

"In both 2002 and 2007, having unmet needs in medical care, or delayed care due to cost, was associated with a higher chance of CAM use," said lead author Dejun Su, Ph.D. "Importantly, for Americans without health insurance, who cannot afford medical care, CAM might be their last and only resort."

Su is director of the South Texas Border Health Disparities Center at the University of Texas-Pan American. He and his colleagues analyzed data



from the 2007 National Health Interview Survey. Based on interviews with more than 23,000 adults, the NHIS showed more pronounced growth in CAM use among whites than among racial and ethnic minorities. This increased an already existing white-minority gap in CAM use, Su said.

Without counting prayer for health purposes, 33 percent of whites report using at least one CAM therapy, while 31.8 percent of Asian Americans, 20.1 percent of African-Americans and 16.9 percent of Hispanics report using these therapies.

The use of CAM rose across all these populations between 2002 and 2007, but at different rates. The increase was highest among whites and Asian Americans, at 18.1 percent and 17.2 percent, respectively. Use among African-Americans increased only 6.6 percent. Use among Hispanics increased only 1.01 percent.

"So far, we know little about how the difference in CAM use has influenced racial and ethnic disparities in health and mortality," Su said. "Research is urgently needed to understand the effectiveness, side effects and interactions of <u>CAM therapies</u> with conventional <u>medicine</u>."

Richard Nahin, Ph.D., senior advisor for Scientific Coordination and Outreach at the National Center for Complementary and <u>Alternative</u> <u>Medicine</u> (NCCAM), says that this study provides clarity to some differences in the use of CAM by various populations. However, he said, the authors neglected to mention one, perhaps crucial, explanation for these differences.

"There is, in fact, some evidence to suggest that the 2007 NHIS underestimated CAM use among Hispanics and non-Hispanic blacks," Nahin said. "For instance, some CAM products for which minority groups report substantial use in small local or regional surveys were not



included in the 2002 or 2007 NHIS."

Nahin, whose research on CAM contributed to the 2007 NHIS, said, "Understanding this possibility, NCCAM is redesigning the CAM supplement to the 2012 NHIS. They hope to better capture the use of various unconventional therapies more likely to be used by minority groups."

More information: Su D, Li L. Trends in the use of complementary and alternative medicine in the United States. *J Health Care Poor Underserved* 22(1), 2011

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