# NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE MEDICINE

## Address:

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## **Mission:**

Created by Congress in 1998, the National Center for Complementary and Alternative Medicine (NCCAM) is dedicated to exploring complementary and alternative healing practices in the context of rigorous science, training complementary and alternative medicine (CAM) researchers, and disseminating authoritative information to the public and professionals. To achieve these goals, NCCAM supports basic and clinical research, issues training and career development awards, and sponsors outreach activities, with the goal of enabling integration of scientifically proven complementary and alternative practices with conventional medicine.

# Selective Achievements and Initiatives:

Stemming the Obesity Epidemic: NCCAM, as a partner in the obesity research agenda developed by the National Institutes of Health (NIH), supports studies to evaluate the safety and efficacy of popular, but unsubstantiated, dietary approaches to obesity and its many complications. In 2003, the Center's investment in this area yielded results, when the findings of a oneyear, multi-center trial regarding the apparent beneficial short-term effects of the low carbohydrate (Atkins) diet on weight loss and risk factors for cardiovascular disease were published in the *New England Journal of Medicine*. In addition to examining the effects of alternative diets on weight loss, the Center is supporting studies on CAM interventions, such as meditation, as treatments for obesity and binge eating. To encourage more research on CAM approaches to weight loss, NCCAM is cosponsoring several major NIH obesity research initiatives and conducting research in its intramural laboratories on diseases linked to obesity — particularly, diabetes.

Ensuring the Safety and Efficacy of Botanical Products: Millions of Americans use botanical products, marketed as dietary supplements, to prevent disease, maintain wellness, or treat illness or pain. NCCAM supports a continuum of research on botanical products that includes developing standardized, well-characterized products suitable for use in human clinical trials, studying the efficacy of botanicals as potential treatments or preventative agents, and analyzing herb-drug interactions. Recent advances addressed conditions ranging from cancer to the common cold. For example, in 2003, scientists demonstrated how extracts from a Chinese herb, Scutellaria baicalensis, inhibit the growth of human head and neck cancer cells in vitro and in mice, while another study concluded that one echinacea product was not effective in treating upper respiratory infections in children. The Center recently launched a major initiative to clarify the health benefits of cranberry and its mechanisms of action, particularly for urinary tract infections and, in collaboration with its NIH partners, will award new Botanical Research Center grants early in 2005 to support interdisciplinary studies of botanicals to generate evidence regarding their safety and potential public health benefits. Further, the Center is cosponsoring the largest randomized Phase III clinical trial to date of the botanical Ginkgo biloba to determine if it can prevent cognitive decline in the elderly. To broaden its botanical research agenda in 2005, the Center will seek applications for Phase I/II studies on the

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safety and tolerability of milk thistle (Silybum marianum) in patients with alcoholic hepatitis, hepatitis C, and non-alcoholic steatohepatitis.

Examining Brain-Body Interactions: NCCAM scientists are exploring practices such as meditation, acupuncture, hypnosis, and yoga to understand their abilities to harness the healing effects of the mind on the body. For example, NCCAM grantees are conducting pilot studies of yoga as a behavioral intervention for the management of chronic lung disease, insomnia, and chronic low back pain, as well as investigating the effect of CAM modalities on immune system functioning. In 2003, NCCAM-funded researchers reported that a traditional Chinese meditative exercise regimen, Tai Chi, could enhance physical performance and immune responses in older people. An extension of brainbody research, mind-brain research, investigates the connection between the conscious mind and the brain and how this interface affects the body's response to a variety of diseases and disorders. In 2004, NCCAM funded mind-brain research to study the use of CAM therapies for neurological conditions, such as Alzheimer's disease, pain, and depression.

Understanding CAM and Special Populations: NCCAM has launched studies to enhance understanding of the interplay of race and ethnicity in CAM use. One study, for instance, will examine four data sets to understand how age, gender, and locale affect various minorities' use of CAM as part of their self-management of highly prevalent chronic conditions, such as diabetes. Researchers are examining the data for patterns of CAM use to construct a clearer picture of how African American, Hispanic, and Native Americans use CAM therapies. NCCAM also proposes awarding planning grants to foster collaborative interactions between investigators at minority/minority-serving (M/MSI) institutions and CAM and conventional researchers to improve the ability of M/MSI investigators to compete for CAM research grants and to encourage more research on health disparities among minority populations.

Gender, just as race, appears to play an important role in CAM use, and women's health has been a particular focus of the Center since its inception. According to a 1999 National Health Interview Survey, preand-post-menopausal women are the most prevalent users of CAM therapies. In the wake of findings on potential health risks of hormone therapy, women are turning to CAM therapies to treat a range of menopausal symptoms. Numerous ongoing NCCAM-funded studies target menopause-related CAM therapies. Some seek to refine our knowledge of the role of plant-based estrogens, called phytoestrogens, in breast cancer and cognitive functioning. Another study examines the function of black cohosh, a botanical that does not contain phytoestrogens but may act as an antidepressant. Should black cohosh prove to work in this way, it may help menopausal women who suffer serious mood changes and depression.

## **Appropriations History**

(\$ in thousands)	
FY 2001	\$89,138 (+30.3%)
FY 2002	\$104,451 (+17.2%)
FY 2003	\$113,407 (+8.6%)
FY 2004	\$116,978 (+3.1%)
FY 2005	\$122,105 (+4.4%)

#### **Extramural Research Project Grants**

(Includes SBIR/STTRs)

FY 2001	127
FY 2002	155
FY 2003	164
FY 2004	208
FY 2005	233

# Success Rate — Research Project Grants FY 2001 17% FY 2002 17% FY 2003 14% FY 2004 17% FY 2005 15%

#### **Research Training Positions Supported**

FY 2001		63
FY 2002		75
FY 2003		77
FY 2004		74
FY 2005		74

### **Research Centers**

FY 2001	14
FY 2002	16
FY 2003	14
FY 2004	7
FY 2005	4

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