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WHOLISTIC NEWS REVIEWS: TRADITIONAL, COMPLEMENTARY, ALTERNATIVE, AND PSYCHO-SOCIAL MODALITIES OF TREATMENT

Larry Lachman, PsyD

Blood pressure and insulin improved with transcendental meditation

Maura Paul-Labrador, MPH and her colleagues at Cedars-Sinai Medical Center in Los Angeles report that in a study of 103 subjects with stable coronary heart disease who were randomized to undergo 16 weeks of either Transcendental Meditation or health education, those who practiced TM showed greater improvement in blood pressure, insulin resistance and cardiac nervous system tone than the control group that underwent general health education. Paul-Labrador and her colleagues partially conclude by writing, "These results suggest that TM may modulate the physiological response to stress and improve CHD risk factors, which may be a novel therapeutic target for the treatment of CHD...demonstrating beneficial physiological effects of transcendental meditation in the absence of effects on psychosocial variables, suggest that transcendental meditation may modulate response to stress rather than alter the stress itself, similar to the physiological impact of exercise conditioning."

Archives of Internal Medicine (2006;166:1218-1224)

After two failures, a third antidepressant showed to be mainly ineffective

Dr. Maurizio Fava and colleagues from the Massachusetts General Hospital report that in a study of 235 adults who initially did not derive benefit from the antidepressant Celexa (citalopram) or other subsequent antidepressants, were then randomized and given either Remeron (mirtazapine) or Aventyl (nortriptyline). The results showed that the remission rates from either one of these third-prescribed anti-depressants were about the same—at approximately 20% (Nortriptyline- 19.8%; mirtazapine- 12.3%), leading to the conclusion that two prior unsuccessful antidepressant trials usually spell treatment failure or low remission rates for a third. The report quotes *American Journal of Psychiatry* Editor-In-Chief Dr. Robert Freedman as saying, "By the third wave of the study, the rate of remission continues to be quite low, which underscores the persistence of depression and its resistance to current treatments."

American Journal of Psychiatry (2006; 163:1123-1125, 1161-1172)

Chronic insomnia better helped by cbt than imovane

Psychologist Borge Siversten, Psy.D. and colleagues from the University of Bergen in Norway report that in a study of 46 adults with chronic primary insomnia treated at an out-patient clinic, those who were randomized to receive cognitive behavioral therapy as opposed to either receiving the medication, Imovane (zopiclone) or placebo, showed greater improvement in total wake time, total sleep time, sleep efficiency and slow-wave sleep than either the medication or placebo groups. For most measures, medication effects were no greater than placebo and at the 6-month follow-up, the CBT group still showed greater sustained improvement in sleep efficiency than the medication or placebo groups. The authors partly conclude by writing, "These results suggest that interventions based on CBT are superior to zopiclone treatment both in short- and long-term management of insomnia in older adults."

Journal of the American Medical Association (2006: 295; 2851-2858),

Suicide risk and elevated omega-6/omega-3 ratios

Dr. J. John Mann and colleagues at Columbia University report that in a two-year prospective study of 33 subjects with major depressive disorder who were given the Hamilton Depression Rating Scale and the Beck Scale for Suicidal Ideation, those who later attempted suicide showed a lower docosahexaenoic acid (omega-3) percentage of total phospholipid fatty acids and a higher omega-6/omega-3 ratios. Dr. Mann states that depressive disorders have been connected with low levels of omega-3 plasma polyunsaturated fatty acids and elevated omega-6/omega-3 ratios. He writes, "...augmentation with omega-3 plasma polyunsaturated fatty acids is reportedly therapeutic...If confirmed, this finding would have implications for the neurobiology of suicide and reduction of suicide risk."

American Journal of Psychiatry (2006; 163: 1100-1102)

Prostate cancer progression slowed by pomegranate juice

The peer-reviewed journal of the American Association of Cancer Research, Dr. Allan Pantuck and colleagues at UCLA report that in a study of 50 men who had undergone either surgery or radiation treatment for prostate cancer and then showed signs of the cancer rapidly returning—measured by how long it took for the prostate-specific antigen levels to double—those who drank pomegranate juice showed a significant slowing of the doubling PSA rate and returning disease (24 months to double vs. 15 months for the men not drinking pomegranate juice) apart from any other treatment intervention. It is theorized that besides the known anti-inflammatory and anti-oxidant effects of pomegranate juice, the isoflavones also contained in the juice are thought to have a role in cancer cell death. Dr. Pantuck partly concludes by writing, "In older men 65 to 70 who have been treated for prostate cancer, we can give them pomegranate juice and it may be possible for them to outlive their risk of dying from their cancer. "We are hoping we may be able to prevent or delay the need for other therapies usually used in this population such as hormone treatment or chemotherapy, both of which bring with them harmful side effects."

Clinical Cancer Research, (12, 4018-4026)

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