

ORAL PRESENTATION

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OA07.02. Naturopathic medicine for the prevention of cardiovascular disease: a pragmatic randomized clinical trial

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Purpose

Cardiovascular disease (CVD) is largely preventable through a number of dietary and lifestyle based interventions utilized in naturopathic medicine. We aimed to test the whole-practice of this discipline for the prevention of cardiovascular disease in a work place setting.

Methods

Multi-site pragmatic randomized controlled trial of enhanced usual care (EUC; usual care plus biometric screening) versus EUC plus naturopathic care (EUC +NC). NC consisted of individualized care provided in work-site clinics by licensed naturopathic doctors (NDs) utilizing one or more of the following strategies: lifestyle counseling, nutritional medicine, and/or dietary supplementation. EUC consisted of usual care provided by the participant's family physician in the community following identification as having a higher relative risk of developing cardiovascular disease. Primary outcomes were incidence of metabolic syndrome and 10-year risk of having a cardiovascular event based on the Framingham algorithm and the Adult Treatment Panel (ATP) III diagnostic criteria for metabolic syndrome.

Results

A total of 246 participants were randomized and enrolled in study work-sites in three cities across Canada; 207 participants completed the study. The two groups were similar at baseline. After one year of individualized naturopathic care, there was a 3.6 percentage point reduction in 10-year cardiovascular risk (95% CI:

-5.1, -2.3) and a 27.4% reduced prevalence of metabolic syndrome (95% CI; -41.7, -13.1) in the treatment arm (n=124) compared to the control arm (n=122).

Conclusion

This study is the first pragmatic whole-practice trial to formally evaluate the benefits of individualized naturopathic care for the prevention of cardiovascular disease. In this setting, and widely generalizable due to the whole-systems methodology employed, naturopathic medicine appears to provide safe and effective risk reduction for people at risk of developing cardiovascular disease.

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