Overview
Complementary and integrative health (CIH) approaches such as acupuncture, mindfulness meditation, and yoga are important safe, non-pharmacologic options to improve health with few side effects. The provision of evidence-based CIH approaches is a national priority for the VA healthcare system and is part of the 2016 Comprehensive Addiction and Recovery Act (CARA). The Complementary and Integrative Health Evaluation Center’s (CIHEC) overarching goal is to improve Veterans’ health and experiences of care through increased availability and use of evidence-based CIH approaches.

Methodology
CIHEC investigators are conducting six projects:

- **Veteran Preference for and Utilization of CIH** collected data on Veteran demand for, use of, and satisfaction with CIH approaches via the Veteran Insights Panel of 3,200 Veterans. The results were disseminated nationally to guide implementation.

- **Battlefield Acupuncture (BFA)** conducted qualitative interviews and examined existing data to determine the effectiveness and implementation of this rapid auricular acupuncture protocol (BFA) on pain.

- **CIH Data Nexus–CIH Provision (Environmental Scan)** is an online survey of all CIH approach program leads in VA to learn details of what, when, where, and by whom CIH is being delivered, as well as what implementation barriers they face.

- **CIH Data Nexus–CIH Use** is compiling, cleaning and analyzing data on the use of CIH therapies nationally to answer questions about which patients are using what CIH therapies.

- **PRIMIER-I** developed and tested electronic patient-reported outcome data collection processes to inform VA’s Office of Patient-Centered Care and Cultural Transformation’s (OPCC&CT) implementation blueprint for collecting patient-reported outcome (PRO) data nationally.

- **Electronic PRO-Data Collection Project (EPCP)** is developing and testing a Veteran-centered multi-modal protocol to collect CIH-related patient reported outcomes for OPCC&CT and VA-wide use.

Findings and Anticipated Impact

**Veteran Preference for and Utilization of CIH.** In the past year, 52% of Veterans used any CIH approach, with 44% using massage therapy, 37% using chiropractic, 34% using mindfulness, 24% using other meditation, and 25% using yoga. Pain, stress reduction/relaxation, and improving overall health and well-being were the top three reasons for using CIH approaches. Eighty-four percent of Veterans stated an interest in trying and/or learning more about at least one CIH approach, with about half being interested in six individual CIH approaches (massage therapy, chiropractic, acupuncture, acupressure, reflexology, and progressive relaxation).

**Battlefield Acupuncture (BFA).** Results show BFA reduces pain. CIHEC QUERI investigators identified 11,406 Veterans who were treated with BFA between October 2016 and September 2018 and had effectiveness data recorded in the electronic medical record. Among these Veterans, 58% experienced a minimal clinically important difference reduction of >2 point reduction in pain intensity. BFA was effective across a wide range of Veterans with many having pre-existing chronic pain, or physical or psychological comorbid conditions. This is a critical finding as it begins to address the question of BFA’s effectiveness and provides preliminary evidence for another non-pharmacological intervention for chronic pain, as information about BFA’s effectiveness was identified by providers as a key barrier to broader implementation.

**CIH Data Nexus–Environmental Scan.** This national survey showed the provision of CIH approaches are widespread in that half of sites offered 6+ approaches; the top 5 were relaxation techniques, mindfulness, guided imagery, yoga and meditation. These results will help OPCC&CT better understand the availability of CIH approaches and how they can be better implemented.

Operations Partners
VA’s Office of Patient Centered Care and Cultural Transformation (OPCC&CT) and VA’s National Pain Management Program.

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