

The timing of these projects explicitly takes the results of the other projects into account.

Results: At the time of the conference results from Aim 1 will be available regarding needs and offers of CAM information for cancer patients and for health care professionals. These results will be presented as well as the structure of the overall competence network.

Conclusion: This is a highly innovative and comprehensive competence network for information on CAM in cancer, and is the first of its kind in Europe. Results from the needs analysis of CAM information will provide empirical evidence as a background for such a network.

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The Effectiveness of Early Intervention for Treatment Community Residents with Depression

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Background: Depression is a common mental disease characterized by high morbidity and high recurrence and suicide rates.

Purpose: Apply early intervention to depressed residents of convenient treatment; compare acupuncture, psychology (Cognitive Behavioral Therapy, CBT), and combined methods for efficacy in improving depressive state and quality of life; analyze the features and advantages of acupuncture and psychological treatments for depression.

Methods: Community residents were studied between Nov. 2009 and Nov. 2010. Residents were assessed using a general statement, CES-D (Center for Epidemiologic Studies Depression Scale), and HAMD (Hamilton Depression Rating Scale). Residents (n=650) with CES-D scores ≥ 16 and HAMD scores >7 and <17 were selected for early intervention. Residents were randomly divided into control, electro-acupuncture, psychological treatment, and combined therapy groups to receive treatment over an 8-week period to evaluate the efficacy of these methods in improving the depressive state.

Results: There were significant differences in HAMD score reduction rates and HAMD and CES-D scores among groups post-intervention and between baseline and post-intervention. The control group showed no significant differences pre- and post-intervention. The electro-acupuncture, psychological, and combined groups showed significant pre- and post-intervention differences in subjective perception of quality of life, health, physiology, psychological relationships, and environmental adjustment. The control group showed no significant differences.

Conclusions:

- 1) Early intervention with acupuncture, psychological therapy, and combined methods can improve depression. The combined intervention is better than either acupuncture or psychological methods alone.
- 2) Acupuncture obviously improves anxiety/somatization symptoms and sleeping disorders. Psychological therapy obviously improves cognitive impairment factors.

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Effect of Electro-acupuncture on Apoptosis of Related Gene in the Hippocampus of Chronic Stress Depression Rats

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Purpose: Electro-acupuncture (EA) has been reported to be effective for treating depression. The purpose of the present study was to explore the specific links of EA's actions on cell apoptosis, which is known to be associated with chronic stress.

Methods: A rat model of depression induced by chronic stress was established by alternating the following, food-break (24 h), water-break (24 h), turn night into day (24 h), Cold water swimming (10 °C, 5 min), heat stress (45 °C, 5 min), clip tail (3 min), bounding (3 h), each stimulus average use 3 times in the process. Rats were randomly divided into

five groups (n=8 each): normal, normal + EA, model, model + EA, and model + prozac. EA was given at points Baihui (Du 20), Yin tang (Extra) for twenty minutes (2 Hz, 0.6 mA, 0.5–1cm) every other day for three weeks. The rats were decapitated and hippocampus tissues were collected following the three-week treatment. Because Bcl-2mRNA and Bad-mRNA are both closely related with apoptosis, so using Real-time PCR technology measurement their expressions.

Results: 1. Bcl-2mRNA Real-time PCR amplification results: there is no difference among groups in cycle threshold (Ct) value; compare to EA group and model group, the EA group showed significantly increased in concentration ratio (CR); there is no different between model group and model + prozac group in concentration ratio (CR).

2. Bad mRNA Real-time PCR amplification results: there is no difference among groups in Ct value; there is also no significant difference among groups, but there is a higher trend in model group, there is a decline trend both in EA group and prozac group.

Conclusions: Chronic stress can cause the change of related gene of cell apoptosis. The anti-chronic stress mechanism of EA has a closely relationship with the increase of anti-apoptotic gene expression and the inhibit of anti-apoptotic gene expression.

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Craniosacral Therapy in chronic neck pain: A randomized sham-controlled trial

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Purpose: Chronic neck pain is a significant public health problem. With only a few evidence-based treatment options, Craniosacral Therapy (CST) might offer an alternative therapy for chronic pain management; however evidence for CST is limited. While there are several clinical trials, no randomized controlled trials with appropriate control conditions were available. Therefore this study aimed to investigate the efficacy of CST on chronic non-specific neck pain as compared to sham treatment.

Methods: A total of 54 patients suffering from chronic non-specific neck pain were randomized 1:1 to either a CST group or a sham control group. Patients were blinded to treatment allocation. The CST group was treated 8 times once a week for 45 minutes according to an Upledger standardized therapy protocol. During the sham sessions of the same duration, therapists placed their hands on various parts of the clothed body for two minutes each time. The primary outcome measure was pain intensity on a 100mm-visual analogue scale. Secondary outcomes included pain intensity related to motion of the head, pressure pain sensitivity, neck pain-related disability, quality of life, anxiety and depression, stress perception, physical well-being, pain acceptance, body awareness, global impression of improvement, and safety. Outcomes were analysed using ANCOVA with post-treatment as dependent variable, group as fixed factor, patients' expectations and respective baseline values as linear covariates.

Results: Intention-to-treat analysis revealed significantly less pain intensity in the CST group compared to the sham group (p=.001). Pain related to motion (p=.003), pressure pain sensitivity at the pain maximum (p=.010), neck pain-related disability (p=.019), quality of life (p=.031), and body awareness (p=.001) were also significantly improved in patients of the CST group compared to sham. No group differences were found for anxiety and depression, stress perception, physical well-being, and pain acceptance. CST patients reported on average strong global improvement ("much better"), while the sham group rated between "no change" and only "a little better". No severe adverse events were observed.

Conclusions: Results suggest that Craniosacral Therapy might be more effective in relieving chronic non-specific neck pain than an active attention-control condition.