

Some thoughts on the use of Complementary therapies within Government controlled health care services.

Mainly UK but can apply to other countries.

A letter (May 2006) from Professor Michael Baum and other leading doctors in the UK, suggested that complementary therapies should not be used by our health service. Their reasoning was that there was little evidence that these therapies were effective. This call was (they claim) partly because cash for effective conventional treatments was limited.

While some of their comments I am in broad agreement with, I do not believe that they should throw out all therapies without further investigation. Therefore, here I will present some facts from an inside but critical view of Complementary medicine.

What are Complementary therapies?

This is an abused terminology. Medical and scientific people side step the fact that many mainstream medical treatments grew from traditional medicine. Examples:

Physiotherapy developed from a background of traditional manipulative body treatments.

Pharmaceutical drugs are still made from plant extracts or are synthesised to emulate potent natural drugs. Some of our most powerful drugs in the future are likely to be based on naturally occurring substances in man, plants and various creatures.

Wound care is thousands of years old and some of the Ancient treatments have only become recognised and used again in recent years. So could the use of leeches and maggots to deal with wounds NOW in hospitals be considered "Complementary" treatment? Could the use of strips to join wound edges instead of sewing be considered "Complementary"? That was exactly the method used by Ancient physicians BCE.

These advocates of "tested" conventional medicine also side step the fact that numerous nursing techniques, older medicines and even surgical techniques have often never undergone any kind of formal evaluation. It is simply accepted by the medical profession that experience shows they work. Non-evaluated "experience" is something I have long castigated in aromatherapy, yet the same lack of evaluation certainly holds good for many medical practices.

What is the difference between main and complementary medicine?

The main difference is this thorny question of sound clinical trials. All modern drugs have to undergo extensive testing, however, despite their tests, many dangerous drugs have been withdrawn from use. This question of trials is where there is a vast gap between conventional and complementary treatments. The International medicines organisations do have reporting systems in place to monitor adverse effects from drugs. When such effects are proven, then the drug can be ordered off the market or changes made to the way it is used. This is the one big factor that does not apply with most Complementary therapies. Any adverse effect reporting is ad hoc and rarely are any substances found to represent health risks banned by the plethora of largely incompetent complementary therapies organisations.

In practice, herbal medicine tends to be the closest to the pharmaceutical monitoring systems. If certain herbs prove to have significant dangers this gets reported in the International phytochemical journals and National authorities will act to restrict the availability of the herb. In some cases the herb is banned, in others its use is restricted to herbal practitioners. Therein lies another minefield as standards of practitioner training and competency around the world are very much open to question. With other therapies such as aromatherapy, the thousands of incompetent teachers continue advocating the use of dangerous extracts despite these dangers being known.

Training and quality control of complementary practitioners.

In many cases this is a complete mess. Whereas herbal practitioners have been around for millennia with a vast knowledge base to draw on, as have some of the body manipulation therapies, some of the more modern therapies are **commercial inventions** without any traditional background. Many can be tracked back to one individual who created a "new" therapy in order to sell the idea and make cash. An Internet search can find numerous quack medicine therapies with thousands of web sites promoting them. Hundreds of thousands of web sites have sprung up where the owner has no formal training on the substances they sell and indeed many are simply clever confidence tricksters. This is a very serious situation for Complementary medicine world-wide, yet no organisation has attempted to do anything about it.

The fact that therapies such as herbal medicine have such an Ancient background does not mean their treatments do not need evaluation in the light of modern knowledge. For example, some herbalists still use some of the sensitising resins despite it being known they can cause problems. If someone is in the jungle and gets a wound, and no modern medicines are around, then fine use the traditional treatment as a side effect may be better than gangrene. However, to use such a hazardous material when safer pharmaceutical treatments are available is foolish and I believe disreputable. Yet it is common to see such traditional treatments promoted on Internet newsgroups. I have also come across many flashy looking websites selling such traditional products and masquerading as "helping native populations" by selling the stuff.

What are the problems using Complementary therapies in health services?

The authors of the above report are correct in that there is insufficient evidence that many therapies are effective. We then have to consider what they mean by effective. For example, if a physical effect is claimed but cannot be proven, then perhaps that claim is baseless. On the other hand, many complementary therapies are used by people simply because it makes them feel better. There is now some evidence that just feeling better does improve immune function and therefore one has to take this factor into account. In my opinion, the placebo effect is initiated far better by several Complementary therapies than by conventional medicine, and the placebo effect is a REAL healing effect.

In reality the above is no different from the use of conventional drugs, many of which act as placebos. In addition, after long term use, some drugs no longer have the expected effect, yet the medical profession continue prescribing them without a second thought. So questioning the effectiveness of treatments works for all, not just Complementary therapies.

We do need much better evaluation of the effectiveness of Complementary therapies, yet many of our trade associations have failed miserably for over 20 years to address this issue. Several of the older therapies have had training clinics for years where no real attempts were made to ascertain the treatments that worked best. The real facts are that most Complementary medicine associations are there simply as a method to gain insurance for their members; to put the leading lights onto advisory committees, and to put them into positions where the public are fooled that any books they write must be the real deal. Member apathy is rampant and therefore disreputable figures easily gain control of the organisations and use them for self promotion and financial gain. Hence the reason we have some real con artists on the advisory committees, particularly in aromatherapy although doubtless in others.

Does the above differ from the medical and scientific establishment? No, some of those people are just as much con artists as in our sector. We have numerous University Professors appointed to advisory committees who then pontificate on subjects they have no expedience or training in. These "experts" often are there simply to obtain Government funding to keep their Universities in business. We have had numerous examples of supposed experts causing unnecessarily economic damage as the result of their lack of real expertise. I give as but one example the mad rush to build up stocks of medicines against bird flu. On the advice of supposed experts, yet based on **theoretical considerations** not real evidence. Millions have been spent on an exercise which may

end up being a huge waste of resources, resources that could have been put into the health services. So do the doctors who wrote this letter consider that the facts behind this huge International effort on bird flu are based on good evidence?

Conclusion:

There is clear research evidence that certain herbal medicines are effective for certain health problems, that essential oils can be effective as antibacterial agents, that massage helps certain conditions, etc. These doctors who call for restrictions would serve their patients far better by calling for adequate research funding for extensive clinical trials. That way at least we will know for sure what is cost effective and what not. Until so-called complementary therapies are given some decent funding then things can only continue in the current haphazard fashion. One plea I have though is that Prince Charles needs to take his head out of the arse of University trained academics and instead support real therapists. In the last 10 or so years the academics who have elbowed their way into Complementary therapy organisations have contributed very little to the advancement of the effective therapies, and done nothing at all to inhibit the useless therapies. Come back Henry the 8th who intelligently realised the academics of the time were useless-little changes!!

Martin Watt

Qualified Medical Herbalist, but never joined the TRADE associations and therefore soon may no longer call himself a "Medical Herbalist"

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