

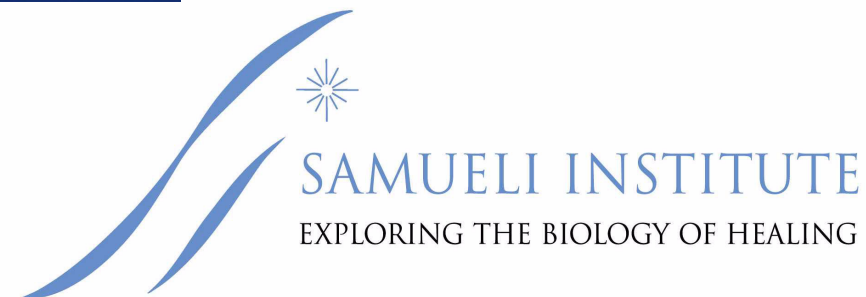
The Contribution of Complementary Medicine to European Public Health - Towards a Research Agenda



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Notions

- Alternative Medicine
 - as an alternative to conventional treatment
- Complementary Medicine
 - in addition or complementing conventional treatment
- Unconventional Medical Interventions
 - an array of different techniques not normally taught or applied by academic medicine



Notions - 2

- Integrative Care
 - Patient centered
 - Using the best of both worlds
 - Integrate CAM best practices
 - where indicated
 - with evidence



Evidence Based Medicine (Sackett)

- Combination of
 - best available scientific data
 - clinical judgment of the clinician
 - preference of the patient

Patients

- 30-70% of European patients have used CAM/IM
- in Germany (Dr. Jung, Allensbach, ECIM, Berlin Oct 7-8 2011)
 - 40% of all patients are regular users of CAM and are convinced
 - 34% are part-time users and sympathetic
 - 60% want combination of conventional medicine and CAM
 - 80% of those with experience in acupuncture want it again

Patients - 2

- Outcome study in more than 5000 acupuncture patients (Guethlin, Lange & Walach BMC Public Health, 2004)
 - 75% had chronic problems and visited conventional practitioners
 - 73% took acupuncture because of low perceived efficacy and/or side effects of conventional treatment
- Want holistic treatments conforming to their world views
- Are pragmatic and follow experience

Problems

- 70% of all medical conditions chronic or functional
- Much conventional treatment inadequate or not very effective long-term
 - fibromyalgia and chronic pain
 - statins are ineffective in primary prevention of myocardial infarction (Ray, 2010, Arch Int Med)
 - pharmacological management of diabetes increases mortality (ACCORD, 2008, N Eng J Med)
 - antidepressants not effective in mild to moderate depression (Fournier, 2010, JAMA; Turner, 2008, N Eng J Med, Kirsch, 2008, Plos Med)

Problems - 2

- Pharmacological treatments long term
 - often practiced
 - very little evidence
 - side effects and interactions
 - NSAIDs 5% of all prescriptions in the UK
 - ▶ 16.500 deaths
 - ▶ 100.000 hospitalisations in US (Coats, 2004, Clin Ther)
 - Iatrogenic problems 3rd important cause of death in the US (Starfield, 2000, JAMA)

Solutions

- CAM/IM has much on offer, yet is often underresearched
 - Hypericum for mild to moderate depression - good evidence, little side effects (Linde et al, Coch Datab, 2008; National Center Complem Med 2010)
 - Mindfulness Based Cognitive Therapy for Depression Relapse Prevention (5 Trials positive)
 - Tai Chi for fibromyalgia (Wang, 2010, N Eng J Med)
 - Acupuncture for pain (Vickers et al, 2011, ECIM)

Solutions - 2

- CAM/IM offers
 - Acupuncture for treatment resistant seasonal allergic rhinitis (Brinkhaus, 2011, ECIM)
 - Lifestyle change can reverse stenosis and cardiovascular disease (Ornish, 1990,1995, 1998, Lancet, JAMA)
 - Diet and nutrition might reverse type II diabetes - only experience, no data
 - Homeopathy perhaps effective in fatigue (Davidson, 2011, J Clin Psych)
 - Homeopathy saves money (Leone 2011, Homeop)

Evidence Gaps

- Effectiveness and cost-effectiveness for many interventions unclear
- Comparative effectiveness versus conventional treatments
- True integrative approaches
- Outcomes data and long term effectiveness and safety



A Potential Role for CAM/IM in European Public Health in the Future

	Acute Care	Chronic Care	Prevention
Conventional Medicine	+++	+	+
CAM/IM	+	+++	+++



Knowledge and Evidence about CAM/IM and Conventional Medicine

	Acute Care	Chronic Care	Prevention
Conventional Medicine			
Knowledge	+++	++	+
Evidence	++	+	+
CAM/IM			
Knowledge	+	+++	+++
Evidence	?	?	(+)

Costs

- Homeopathy cheaper in the long run (Witt et al 2005 CTM)
- Acupuncture more expensive short term, but cost effective long term (Witt et al 2008 Cephalalgia)
- Chiropractic saves money (110\$ per case and problem), less surgery with less back and neck problems (California experiment) (Pelletier et al 2010 Explore)
- Ornish diet 7.000 \$ compared with 30.000\$ for microsurgery (Ornish 2009 Lancet Oncology)

Costs (ctd)

- Saving of 50 Mio AU\$ if all depressed Australians were to use hypericum (National Institute of Complementary Medicine 2010)
- Mindfulness Based Cognitive Therapy for Depression Relapse Prevention more cost-effective and more effective than antidepressants (Segal et al 2010 Arch Gen Psych)
- Introduction of CAM into health system saves costs with some (homeopathy) modalities and does not add additional costs overall (Studer et al 2011 Forschende Komplementärmedizin)

Obstacles

- Medical Faculties (Opinion Leaders)
 - "mainstream" oriented
 - lot of stakes in classical pharmacological research
 - perhaps 80% funding or more from pharmaceutical companies
 - massive conflicts of interest?
 - e.g. STAR*D trial

Rush JA, Trivedi MH, Wisniewski SR, Nierenberg AA, Stewart JW, Warden D, Niederehe G, Thase ME, Lavori PF, Lebowitz BD, McGrath PJ, Rosenbaum JF, Sackeim HA, Kupfer DJ, Luther J, Fava M (2006) Acute and longer-term outcomes in depressed outpatients requiring one or several treatment steps: A STAR*D report American Journal of Psychiatry 163, 1905-1917

Obstacles - 2

- Research support nearly exclusively from small charitable sources
 - small public programs in Switzerland, Germany, UK, Norway
 - Carstens-Foundation
 - Bosch-Foundation
 - Insurance Companies
- Very little industry support
- Sporadic EU funding

Situation Worldwide

- NCCAM
 - budget of 110-150 Mio\$ funding per year
- Australian National Centre for CAM - closed down
- First EU funded research projects - CAMbrella
 - European coordination by ISCMR, no funds
- 7 endowed chairs of CAM or IM research in Germany, 3 positions in UK, 1 in Norway
- Rising campaign against CAM

Situation Worldwide - 2

- WHO has declared CAM/Traditional Medicine an important element in healthcare worldwide
 - Declaration of Beijing 2008
 - Challenges member states to support research and access to CAM/TM
- Conventional Western model of medicine not sustainable long term
 - in the West
 - worldwide

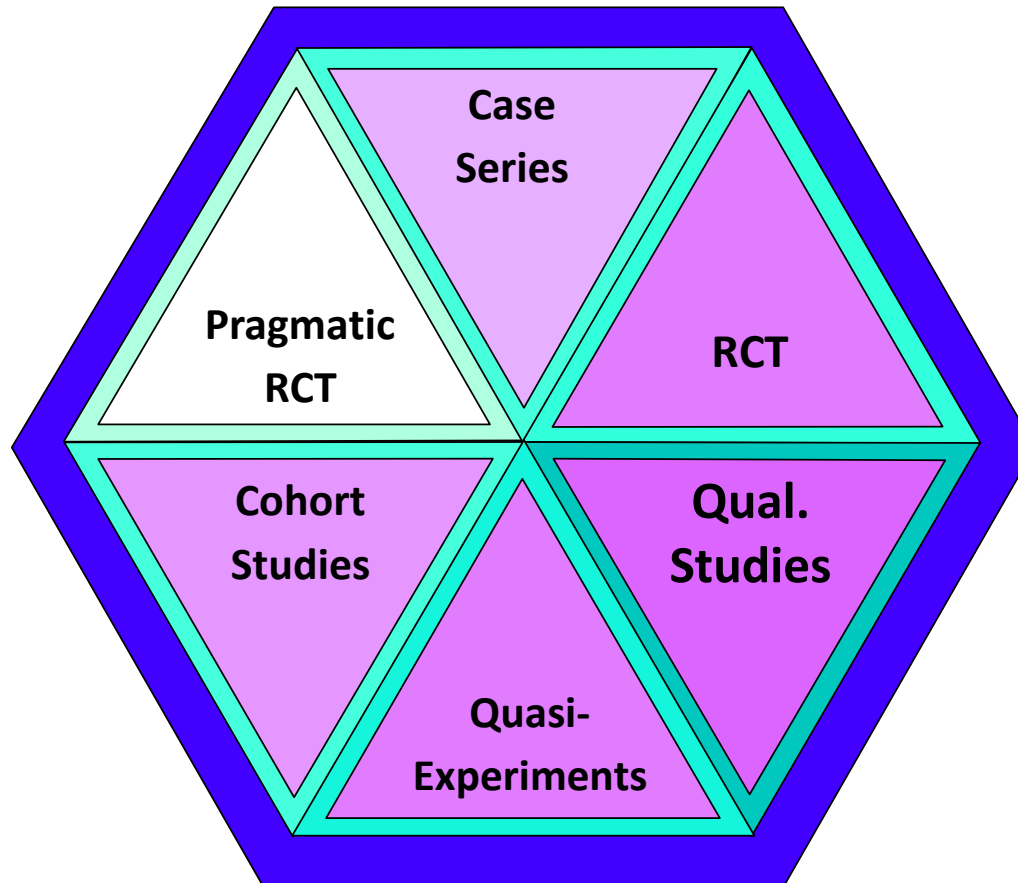
The Current Intellectual Bias

- Dominance of the pharmacological model
 - research to seek admission ---> trials
- Machine model of the organism
 - seek interventions as fixes
 - excludes activity of the "machine"
 - agency of patients and doctors ignored
- Does not justice to the complexity of the human situation and problems
 - CAM/IM interventions are complex
 - Need complex research agenda

What Needs to Happen?

- Dedicated European funds - Horizon 2020
 - ringfenced, focusing on model validity
 - specific and knowledgeable reviewers
 - integrated and for specific questions
 - outcomes in practice, cost-effectiveness
 - European consortia
 - strategy following the roadmap of CAMbrella
 - methods
 - targets
 - steps

Circular Model Walach et al 2006 BMC Research Method

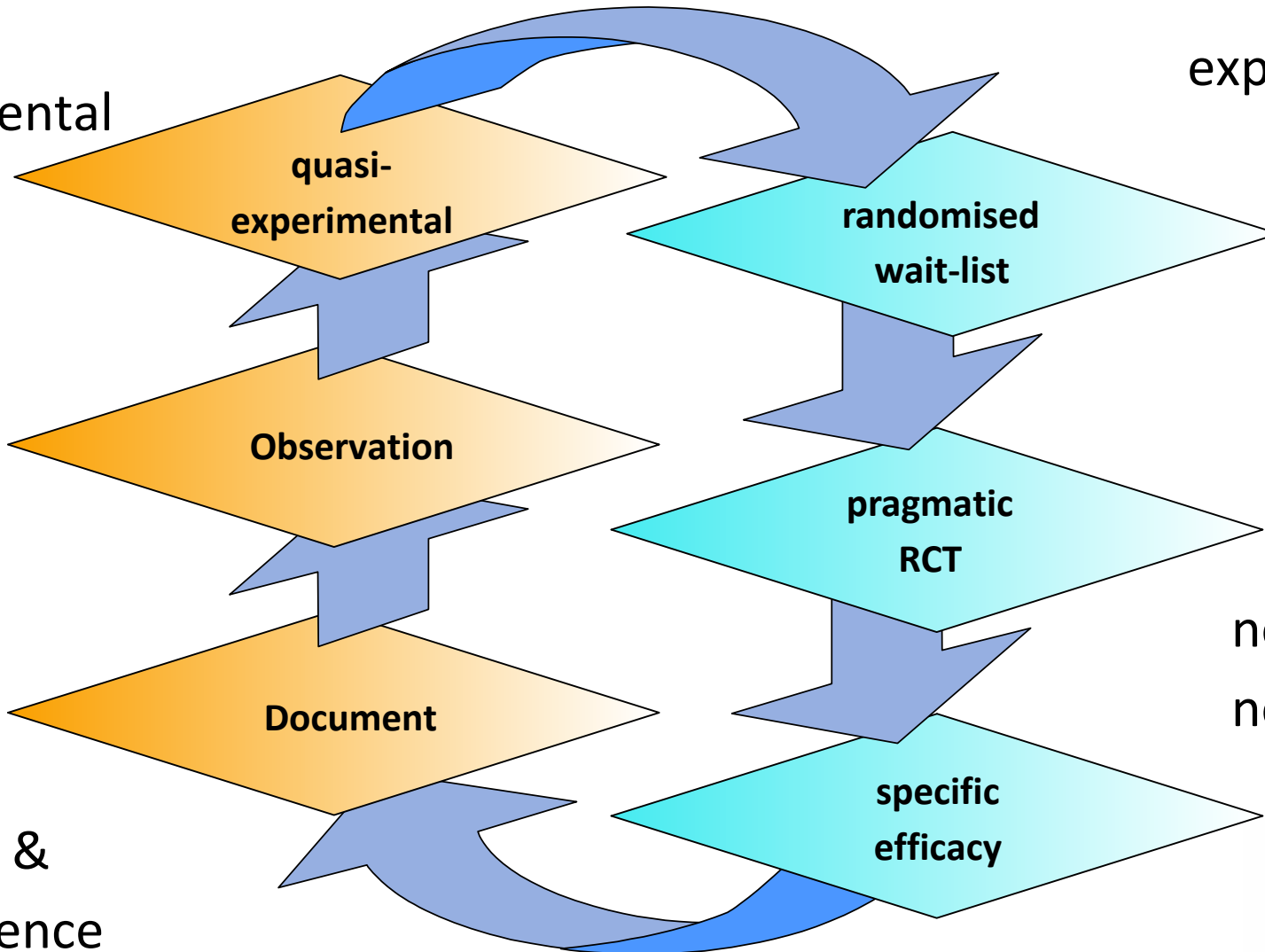


Complementarity
of
methods to
balance
respective
strengths and
weaknesses

Circular

non
experimental

experimental



no choice &
no preference

choice &
preference

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Heilpflanze des Jahres 2007

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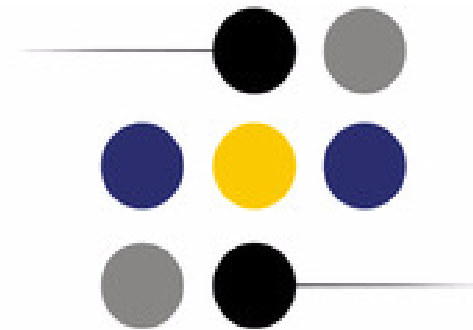


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