

THE SATURDAY PAPER

HEALTH

As natural therapies grow in popularity, efforts to regulate the industry and curtail public use have increased. But are these efforts about control rather than science, and are they restricting our access to well-researched, low-risk therapies that may improve public health?
By *Linda Moon*.

Natural therapies under attack



The president of the Australasian Integrative Medicine Association, Dr Penny Caldicott.

CREDIT: @RAPHAELDINDY



Following the removal in April of 16 natural therapies from private health insurance rebates, it has become harder to implement programs and obtain grants to research these treatments, says Dr Jon Wardle, associate professor of public health at University of Technology Sydney. Therapies with a solid evidence base – such as naturopathy, tai chi and yoga – are excluded under the new provisions after the medical establishment-led review deemed their efficacy was not proved. Crystal healing, on the other hand, is still claimable, leading many within the complementary health sector to say the new restrictions are part of a greater turf war being waged by the medical profession in response to the rising popularity of natural therapies.

Wardle's concern is that bias in the health bureaucracy hinders people's access to natural treatments that *do* work. "The evidence base is shifting to favour many complementary medicines," he says. "In many cases they are the *only* treatments that might be helpful for some conditions."

While he's keen to see some elements of the sector regulated, the process needs to be objective. "There are risks in complementary medicine. The thing is to assess them in the same way," he says. "In herbal medicine, for instance, very small risks are often painted as drastic. Clinical evidence for St John's wort – equally effective as other treatments used [to treat] mild to moderate depression – has been around for over 20 years. But our studies show a third of doctors would refuse to use a herbal medicine simply because it's a herbal medicine. Just because you've got a clinical grudge against something doesn't mean it doesn't work."

An inequity in resourcing also disadvantages the natural therapy sector, Wardle adds. "This is half the healthcare sector in Australia, but it attracts probably less than half a per cent of research funding in Australia."

Integrative doctors – those who offer evidence-based complementary interventions alongside conventional medicine – are also feeling attacked. Citing concerns around patient "harm", in February, the Medical Board of Australia (MBA) proposed tighter regulations targeting those practising "complementary" and "unconventional" medicine or "emerging treatments".

Dr Penny Caldicott, president of the Australasian Integrative Medicine Association (AIMA), is concerned these three practices are being lumped together and that therapies with a strong evidence base aren't distinguished from more controversial ones. "The definitions of those things are also not very clear," she says. "Who determines what's conventional?"

According to a source of Caldicott's, requests to the MBA for information under the freedom of information act have failed to produce any rationale for their concerns, or evidence of relative risk. "Of all the reported adverse reactions to drugs and supplements reported to the TGA [Therapeutic Goods Administration] in 2016, only 1.5 per cent of those were related to non-pharmaceuticals," she says.

“SEVENTY-FIVE PER CENT OF OUR POPULATION USE COMPLEMENTARY AND INTEGRATIVE MEDICINE ... IF THERE'S EVIDENCE FOR THESE VERY LOW-RISK INTERVENTIONS, THEY SHOULD BE PART OF MEDICINE.”

Caldicott says the current guidelines regulate the profession adequately. Her fear is that the proposed changes will unjustifiably inhibit integrative doctors from practising and prescribing natural therapies. "Seventy-five per cent of our population use complementary and integrative medicine. If we don't know about it, then we're not doing our job. If there's evidence for these very low-risk interventions, they should be part of medicine."

A tsunami of chronic illness means there aren't enough integrative doctors to meet demand. "Many of them have their books closed," says Caldicott. "I don't think our current medical system is set up to address the early signs of chronic illness. This is an essential need for our community, particularly if we want to preserve the health dollar."

Dr Kylie Dodsworth, director of an integrative health centre in Adelaide, and a former AIMA vice-president, says many integrative doctors are hindered from performing their work because of complaints to the MBA by peers. "In nearly all of those cases the conclusion is there's been no harm to the patient," she says. However, the investigation process – a minimum of four months – involves massive stress, suspension from work, income loss and interruption to patient care. By contrast, Dodsworth says, "The doctor who makes the notification can literally just write a two-sentence complaint to the medical board and remain anonymous. The onus is on the person who had the complaint made against them to spend significant time and energy defending their position."

When it comes to patient safety, the MBA might care to look in their own backyard. Lorraine Long, founder of the Medical Error Action Group, says data shows one in every 10 patients of Australian hospitals will experience a medical mishap resulting in injury or death. A landmark 1995 study found adverse medical events occur to 16.6 per cent of hospital patients in Australia, corresponding to about 18,000 deaths a year. "There's no proof the figures have reduced," Long says. "It's the same mistake happening over and over again and glossed over. It's more about protecting doctors' rights."

Dr Monique Lewis, a lecturer in communications at Griffith University, has noticed an increase in negative media reporting of complementary and alternative medicine, or CAM, coinciding with the Friends of Science in Medicine (FSM) becoming active in 2011. Using content analysis, she dissected 76 mainstream news reports between 2011 and 2017 containing the search terms FSM and CAM therapies. "The illegitimacy [of CAM] and the framing of the industry and professions as ethically dubious were the most prevalent frames," she says. "This very much aligns with FSM's position statement about CAM on their website." Lewis was surprised how few CAM researchers were approached for comment in these stories and says there's a need for more scientifically rigorous health reporting in Australia.

Wardle believes complementary medicine opponents are currently Australia's biggest barrier to better regulation of the sector. "They have campaigns where they trawl websites for what are often inadvertent and minor issues and

send multiple complaints to regulators like TGA or AHPRA [Australian Health Practitioner Regulation Agency] rather than work with therapists to correct breaches in more cost-effective ways. Each complaint costs a few thousand dollars to process. They've done thousands already. Just to make a political point these groups cost the Australian taxpayers millions of dollars that could be better spent actually delivering the kind of changes they claim to be advocating for. They want to take natural therapies out of universities. We know unequivocally that putting Chinese medicine, chiropractic and naturopathy into universities actually reduces bad and fringe practice."

Gerry Dendrinis, president of the Australian Homoeopathic Association and the Your Health Your Choice campaign, feels the natural health industry is suffering a gradual death by a thousand cuts. "It's undermining public confidence in seeing a natural therapist, and people's ability to practise."

The Your Health Your Choice campaign was launched in 2017 to counter the anti-natural medicine lobby groups and give voice to the millions of Australians who use natural therapies. Between February and March 2019, the campaign focused public outrage over the removal of private health insurance rebates for natural therapies, resulting in 13,324 people individually writing to Health Minister Greg Hunt asking him to rethink the policy. Dendrinis credits the campaign with the government's decision to undertake a new review. "It's a very autoimmune policy because it increases costs on the health system," he says. "They ignored research showing when people do consult a natural therapist they're generally healthier and claim less on private health insurance." The campaign also recently generated more than 12,000 public submissions to the MBA supporting integrative GPs, Dendrinis says.

Homoeopathy and other traditional therapies enjoy greater status in Europe and Asia, he says. In contrast to what happened in the 2015 review, the new expert panel reviewing evidence for natural therapy rebates will include CAM research experts such as Wardle.

"There's a turf war going on divorced from people's healthcare needs," Dendrinis says. "It's stupid because the consumer loses in the end. They're not turning to it [natural medicine] as a standalone alternative, but in an integrative way. The people just want all healthcare professionals to work together."

This article was first published in the print edition of The Saturday Paper on Aug 24, 2019 as "Naturally disinclined".
[Subscribe here.](#)



Linda Moon

is a freelance health and lifestyle writer.
