

Newsletter no 14: Spring 1994

- [Serious disease claims made for food supplements](#)
- [Censured diet ads](#) bore MOPS logo
- New [diet pill tactic](#)
- Surges in [herbal sales will falter](#)
- [Full recovery from seven blood clots](#)
- [Homeopathic sales can continue](#) without proof of efficacy
- Free [anti-wrinkle tablets](#)
- Harley St [skin ads criticised](#)
- [Homeopathy degree](#) funded for GPs
- [HealthWatch challenges Hay diet to trial](#)
- [Paper-watch](#) - from the press
- Healthwatch rejects Labour's proposals for [complementary therapies on the NHS](#)
- New complementary Professor stresses 'scientific rigour': [interview with Edzard Ernst](#)

Serious disease claims made for food supplements

Claims that food supplements can treat serious diseases, from severe ulcers to ovarian cancer, are being made at seminars organised by a supplement company for its customers.

HealthWatch has been to one of the seminars at which speakers recommended supplements that contained ingredients such as calf brain and mammary gland. Delegates were sent home with £150 worth of free products.

The seminar was organised by a company called Nutri. It sails directly to nutritional practitioners rather than displaying products on shop shelves. The claims made at the seminar were lawful because they do not appear in writing on the products that Nutri sells. If they had appeared on the products Nutri would have been obliged to comply with the Medicines Act and obtain product licences. These are only granted after plenty of evidence that they work and are safe.

Disturbing

The HealthWatch delegate found the seminar disturbing: a captivated and uncritical audience, virtually all non-medics, asked the speakers how they should treat a shopping list of serious diseases that their patients suffered from. A typical reply was in the form of a list of supplements and their dosages before moving on to the next disease. A practitioner asked about a supplement for ovarian cancer. She was told that results would be slower than for other conditions.

Often the failure of a supplement to work was explained by a deficiency in another nutrient.

The two-day seminar was entitled Breakthroughs in Clinical Nutrition. It cost £176. There were two speakers:

Dr Richard P Murray D.C., whom the conference literature described as a graduate of Texas Chiropractic College and one-time director of clinical research for the Biomedical Institute; and Dr Corey Resnick N.D. a naturopathic physician with a background in private, family practice.

Ovarian Cancer

For ovarian cancer a delegate was told to give two capsules a day of quercetin, which conference literature said is a biologically active member of bioflavonoid family. Quercetin also showed promise in leukaemia, according to Dr Resnick.

For Aids and HIV-positive people, NAC (N-acetyl-L-cysteine, described as an endogenous amino acid derivative of thiol-containing cysteine) was recommended. NAC would also protect against alcohol-induced gastric ulcer.

Dr Murray warned the audience that the dangers of chelation therapy, a controversial remedy for arteriosclerosis, could be avoided by administering three ACP/M tablets a day for 6-12 months before the therapy. ACP/M contains freeze-dried potato and carrot powders, alfalfa, vitamin C, rutin, d-Salina, beta carotene, lemon bioflavonoids, rose hips, echinacea, shiitake mushrooms, buck wheat seed flour, and wheat grass juice, according to the seminar literature.

Parkinson's Disease

For Parkinson's disease, Dr Murray suggested that a new product, Neurotone, may hold great potential. A tablet of Neurotone includes calf brain, 80 mg; thymus tissue, 25mg; hypothalamus, 15 mg; parotid, 1 mg, according to the seminar literature.

For motor neurone disease patients he recommended a schedule that included three Neurotone and at least 19 other tablets each day.

Dr Murray said he put impotent patients on herbal Vitex tablets. "If you want to have complete confidence then use Biostress B". Vitex contains yohimbe bark, damiana, gotu kola, hawthorne berries, beetroot and Korean ginseng.

Babies

Babies of six months, with no health problems, were to be given: Calac (calcium and magnesium) tablets if they were not taking raw milk; Osteomyn (containing all 20 amino acids which it is essential to ingest simultaneously to ensure proper assimilation) and Biostress B, a yeast-containing tablet,

For healthy adults, practitioners should hand out the following: two Calac on arising; two Minbal on going to bed (also magnesium and calcium compounds); two Biostress-B with their largest meal; two Osteomyn with their first meal; one super wheat germ oil.

For asthma and emphysema, Dr Murray recommended nine different products each day. A regime of 21 tablets a day was recommended for Parkinson's disease.

Multiple Sclerosis

Multiple sclerosis patients should have a special diet. They should drink one pint of raw milk a day, eat plenty of fats and eliminate all fluoride from the diet. MS sufferers need fats from unprocessed oils, he said. "The myelin sheath is about 80 per cent fat. If we are going to replace these essential shields we have got to have the fats and got to have galactose," he said.

Evening primrose oil had caused spectacular improvements in MS patients, he said. So had ionisable phosphorous and calcium.

Allergies

On allergies, Dr Resnick said: "Quercetin is effective upon ingestion for the treatment of multiple allergies and hypersensitivities... in different parts of the body not only the gut... it's really remarkable in some cases - we hear case studies all the time that indicate its effectiveness.

"I'm reminded about a patient that had considerable oedema as a result of hypersensitivity, the whole face was puffed up and they'd been from practitioner to practitioner treated with antibiotics, treated with hydrocortisone. When she finally got on Quercetin, within 24 hours the swelling began to reduce and it took about a week or two... to bring things under control."

The audience lapped up Dr Murray's other claims:

Skin cancer is not caused by the sun. Instead, it is caused by a lack of tyrosinase, tyrosine, magnesium and all the factors necessary to make melanocytes: "If you have vitamin deficiencies you're going to have more of a chance for those skin cells to become malignant if they can't produce the pigment that they should", he said.

Herpes is not caused by a virus: "That's nonsense," he told the audience. "Genital herpes is not a communicable disease believe me - I assure you and I have got lots of research to back it up". Instead it is a result of excess vitamin D depressing the ionised calcium levels.

"If you have a patient with herpes simplex they need 6-8 Calac tablets a day for one month, then 3-4 a day." In the sun, more Calac should be taken, he said.

Deficiency

If this therapy did not work, said Dr Murray, it could be because of a deficiency in essential fatty acids - "then you do not have proper transport of calcium from the blood stream to the tissue".

Pasteurised milk makes people grow too tall, said Dr Murray. He called for all patients to be put on raw milk instead: "When you pasteurise milk you will eliminate the essential amino acids needed by the pituitary gland to produce the hormone that says it's time to stop growing."

For more on the activities of Nutri and of Harry Howell, a Harley Street practitioner associated with its products, see *New Statesman and Society*, 4th February p14.

See also [Newsletter 16](#)

Censured diet ads bore MOPS logo

Diet pill advertisements are breaking advertising standards despite the fact that they are hearing the MOPS (National Newspapers' Mail Order Protection Scheme) logo.

A Vitahealth advertisement for "Sleep & Slim" capsules, containing many testimonials to weight loss, appeared in some Sunday colour supplements with the MOPS logo. MOPS told the ASA that it had required that all advertising copy be cleared by the Committee of Advertising Practice and was concerned that this had not been done.

The MOPS scheme is aimed at financial protection for customers but includes a clause in which advertisers agree to abide by the ASA code.

Vitahealth also advertises FB 900 Fat Breaker miracle diet capsules using the MOPS logo, HealthWatch has found. The advert quotes a "Leading European Medical Researcher" as saying: "Each capsule literally melts away up to 900 times its own weight in fat".

Bromelain

The researcher describes how he discovered bromelain, a digestive enzyme of pineapple. The advert also says: "The doctor states: 'Taken with meals, it works around the clock to make you effortlessly lose more weight than if you jogged 14 miles each day'".

The Vitahealth advert has not been censured by the ASA. The MOPS logo has been used on a weight loss advert by Quest Hair Research, published in *The Times* magazine and *The Guardian*.

The advert said: "double action crash diet ... carries on working for you 24 hours a day even while you sleep". The publications said that they had assumed that as it bore the MOPS logo it had been authorised by the ASA.

Slimfast

The MOPS logo was also present in an advertisement for Natural Herbal Slimfast, placed by City Trading. It was carrying the headline: "Reduce from size 14 to 10 in 21 days or your money back".

New diet pill tactic

An alarmist message has been added to some diet pill advertisements as their sellers try to make the pills appear to be as powerful as possible.

Claims

Advertisements are claiming that some slimming pills are so powerful that dieters should restrict their intake of them in order not to lose weight dangerously fast.

In an advert for Figureform, available from Quietlynn, it is claimed that you can eat what you want and still lose weight".

"Warning"

The advertisement says: "Warning: If you are losing too much weight too quickly stop taking Figureform for a few days. You may order as many courses as you like, but due to the rapid weight loss you will incur we suggest that you break between courses.

Readers thus infer that Figureform is very powerful: it "blocks the digestion of starch, therefore not allowing the foods you enjoy eating from turning into calories. The fat is blocked out but the vitamins and essential minerals and proteins are still absorbed by the body."

HealthWatch found the advertisement in the weekly London magazine, *"Nine to Five"*.

"Bans Calories"

Also appearing in *"Nine to Five"* magazine is an advertisement for Kaliban94, obtainable from Adler Research, which the advertisers say "bans" the absorption of calories by the method of "blocking out the digestion of fats and starch".

Then comes the "danger warning" for over enthusiastic slimmers: "It is so effective at promoting weight-loss that we would recommend that you stop taking it for a few days if you start to lose weight too quickly."

Surges in herbal sales will falter

The surge in herbal medicine sales will peter out rapidly over the next few years, market researchers have predicted. Fears about the safety of herbal medicines will slow their growth, says Datamonitor. But homeopathic over-the-counter products, perceived as holistic and completely safe, will continue to boom, says the company.

Datamonitor studied European sales of homeopathic and herbal medicines between 1987 and 1992. It found that they have grown faster in the UK than in any other European country, reaching \$170 million in 1992 a rise of 15 per cent.

The UK homeopathic market grew by 20 per cent. The herbal market grew by 14 per cent. But sales per head in the UK remain far behind Belgium, France, Germany and the Netherlands (\$6-8 per head compared with \$2).

DataMonitor forecasts that the UK will continue to show the highest growth in homeopathic sales, with an expansion of a further 12 per cent by 1997. But herbal sales growth will drop to three per cent.

[Top of page](#)

A Chinese herb seller has been criticised by the Advertising Standards Authority for claiming that products would be effective against asthma, arthritis, herpes and eczema. The advertisement, placed by Chinese Herbal Health Consultants, based in south west London, was placed in specialist press. The company submitted evidence that suggested that its therapy might be of help to eczema sufferers but failed to submit adequate evidence in support of the other claims, said the ASA.

[Top of page](#)

Full recovery from seven blood clots

The dramatic claim that a woman fully recovered from seven blood clots after taking 'BioSelenium + Zinc' is the latest example of supplement company Pharma Nord's advertising campaign.

The company has a history of using personal testimony in which its supplements are implicated in such miracles as the cure of osteo-arthritis and the relief of asthma or 'difficult' menopause. The testimonies appear either in advertisements or in free or local newspaper articles from which they are sometimes copied and used in advertising brochures (see HealthWatch newsletters [12](#) & [13](#))!

A double-page spread "advertisement feature" in **Natural Choice** magazine tells of how a woman who twice had water emptied from her lung accompanied by seven consecutive blood clots fully recovered three weeks after taking Bio-Selenium + Zinc.

The article says that 43 year-old Sandra Laursen's doctor told her to take the tablets: "I did as I was told and soon began to recover. Energy returned to my body. I had this prickling sensation,"

"I can hardly describe how good I feel, It is terrific to have energy to do whatever I want",

No Coincidence

The feature goes on to say: "Sandra's recovery is no coincidence. Science has demonstrated selenium's positive effect against the free radicals that attack the fatty acids in our cardiovascular system, and in some cases cause thrombosis",

The article, by B. Falk, concludes: "The importance of selenium is unquestionable, We should focus our attention on getting the optimal benefit from the selenium supplement we take."

The magazine is available in Holland & Barratt, the health shop.

[Top of page](#)

Homeopathic sales can continue without proof of efficacy

Homeopathic manufacturers have won their long-running battle to be able to sell their remedies without having to prove that they work.

New European Union regulations have forced the Government to introduce a registration scheme which will allow few homeopathic products to be sold if there is proof of safety and quality -but there will be no need for proof of efficacy. The remedies will carry the label: "homeopathic medicinal product without approved therapeutic indications."

The Medicines Act of 1968 had dictated that no new drug could be licensed unless it was proved to be safe, of good quality and efficacious.

Thus, no new homeopathic remedies could be sold in chemists and health food shops because there is little, if any, proof that they work. Old remedies were given "licences of right" - manufacturers were allowed to continue selling them without having to go through the strict procedures necessary to get a licence,

Surveys show that one in ten people have tried homeopathic medicines,

[Top of page](#)

Free anti-wrinkle tablets

Free anti-wrinkle tablets have been advertised - available with every jar of Sincera anti-wrinkle cream purchased. Youth Glow Retinol Products, based in Guernsey, claimed in a leaflet that "Youth Glow Internal Beauty System tablets will work in harmony from the inside to give you back those youthful looks you thought had gone forever."

A complaint to the Advertising Standards Authority was upheld.

[Top of page](#)

Harley Street skin ads criticised

Harley Skin & Hair Clinics has been criticised for advertising a "safe and natural medicine" for relieving the symptoms of psoriasis, eczema, acne, rosacea and vitiligo,

The company, whose address is 7, Harley Street, failed to provide substantiation of efficacy, according to the Advertising Standards Authority.

[Top of page](#)

Homeopathy degree funded for GPs

Homeopathy is now "in the academic arena" despite the paucity of studies that show that it works,

A masters degree in homeopathy has been launched by Liverpool John Moores University. Mike Money, course leader, says: "This pegs homeopathy very firmly into the academic as well as the medical arena".

The course is mainly for doctors and has been approved for GPs so that they can claim an allowance for taking it as part of their compulsory continuing education,

Dr Money, who is senior lecturer in the Centre for Health Studies at the university, said: "The effectiveness of homeopathy is something that no-one could disagree with. It has been trialled by a body of experience for far longer than any medicine."

Doctors will learn to administer homeopathy to patients and address issues such as incompatibilities between the philosophical models of homeopathic and orthodox medicines, he said.

The course has been developed with the Department of Homeopathic Medicine at Mossley Hall Hospital in Liverpool. Nurses, midwives, pharmacists, dentists and vets will be able to take postgraduate certificates and diplomas.

[Top of page](#)

HealthWatch challenges Hay Diet to trial

Hay diet advocate Mrs Kathryn Marsden has been challenged by John Garrow, Professor of Human Nutrition at St. Bartholomew's Hospital Medical College, to take part in a comparison between her highly publicised weight loss regime and a calorie-controlled diet.

The challenge came after both Mrs Marsden and Professor Garrow appeared on the BBC's *Food and Drink Programme* talking about the Hay diet, which aims to cause weight-loss by combining certain foods and avoiding other combinations. The two have since appeared on Radio 4's *Today* programme.

Boffin

During the *Food and Drink* programme, Mrs Marsden said that if "some boffin" was unconvinced about food-combining then he should test the diet.

"I am happy to take up that challenge, Professor Garrow said in a letter to the Food and Drink programme. He proposes that a normal subject is given a diet of meals in which concentrated protein, starch and fruit are eaten together and the total energy is 1000 kcal/day.

Calories

This diet will conform to Professor Garrow's belief that a diet low in calories will cause weight loss.

The subject will then be given a diet in which the protein, starch and fruit are separated in time, but the total energy is 3000 kcal/day.

Professor Garrow believes that weight loss is not possible with such a high calorie intake, But, if the Hay diet is correct, separation of the food components will cause weight loss even at 3,000 kcal,

£1,000 Stake

Let us find out who is right," said Professor Garrow,

I am happy to post a stake of £1000 with the Food and Drink programme if Mrs Marsden will do likewise and you can inform your viewers about who collected the money when the experiment was done.

[Top of page](#)

Paper-watch

The existence of False Memory Syndrome is a subject of much debate. Some say that psychologists and therapists are eliciting false memories of child abuse from vulnerable patients.

"**Arlene's Agony**" is the harrowing story of a Californian woman whose sister claims they were both sexually abused by their father as children, The woman describes her visit to her sister's therapist who, after an investigation of contrived simplicity" said that her sister showed undeniable symptoms of sexual molestation, "With that small endorsement from her lips my sister's memories were given scientific credibility," says the writer.

The Guardian, January 6th 1994, p2.

"**Logic and magic in mainstream and fringe medicine**" suggests that there is a side to our nature that dislikes logic and seeks an outlet similar to that of religious observance.

Thurstan Brewin discusses the lack of logic in both mainstream and fringe medicine and predicts that there will be a time when not using randomised, pilot trials will be considered irrational and unethical. He calls for a doctors to aim for a kind heart and a keen intellect.

Journal of the Royal Society of Medicine, December 1993, p721.

"**Lizards for asthma, antlers for the kidneys**" discusses the growth of Chinese herbal medicine in the UK - there are now about 600 clinics here. Chinese herbs come into the country as herbs and not medicines, says the Department of Health, so they do not require a licence.

There is a description of the writer's visit to a Chinese herbal doctor. There is an account of a man who had a severe reaction to a remedy leading to emergency treatment with steroids. The writer quotes the heads of various UK herbal associations who call for better knowledge about toxicity of the herbs and for state registration of all herbal practitioners.

The Independent, 7th December 1993, p22

[Top of page](#)

HealthWatch rejects Labour's proposals for complementary therapies on the NHS

Complementary therapies should be provided for all on the NHS, according to Labour party provisional proposals. Shadow Health Minister Dawn Primarolo has issued a consultation document which says that "complementary therapies are cost-effective, saving money by avoiding costly drug treatment and surgery; and, whilst Labour supports more research, the medical efficacy of the most popular and well established therapies is accepted." Labour has invited wide discussion of its proposals. HealthWatch wants plenty of discussion and has sent this reply as its first step:

1(a) We feel that the Labour Party's consultation document is badly weakened by its surprisingly uncritical acceptance of current claims being made for the effectiveness of every kind of fringe medicine - also called complementary, alternative, unconventional, holistic, or natural.

The reasons for the present greatly increased public interest in this area - seen to an even greater extent in

several other countries - are complex. But history shows that such waves of increased enthusiasm have happened before, only to be followed by disillusionment.

1(b) There is at present very little good evidence that these various treatments have made any progress or are any more effective now than they were a hundred years ago.

Nevertheless, HealthWatch believes that any new evidence should be carefully examined, We also fully recognise both the variations within fringe medicine and the weakness and past mistakes, as well as the strengths, of mainstream medicine.

1(c) Whether paid for by the taxpayer or the patient, unconventional medicine (and some conventional medicine) often costs time and money that could be better spent meeting other needs, If given as an alternative it may save money, but perhaps at the price of being less effective, If complementary - that is to say additional to standard treatment - the extra cost to the NHS could be a serious burden.

1(d) Though many healers and practitioners of fringe medicine want only to help the patient at a reasonable charge - or even none - HealthWatch is also concerned that certain claims and practices amount to exploitation of people when they are at their most vulnerable, taking commercial advantage of the current climate, Mainstream health care of course, is also by no means free of abuses of this kind.

Four basic points

2(a) Mainstream medicine believes in putting the patient first, in comforting as well as curing, and has the advantage that - unlike most fringe medicine - it does not follow any particular method or theory, but aims to help the person seeking help in whatever way gives the best chance of Improvement. To most of us, when ill or with a medical problem, it is results, not systems or theories, that count. There is nothing to stop any remedy of real worth entering mainstream medicine.

2(b) Fringe medicine, on the other hand, is full of sweeping and contradictory theories and with them often come equally sweeping, all embracing treatments. Each one of a very large number of quite different systems and theories - often advised for almost any medical condition, whatever its cause - is followed by a similar number of claimed successes, This suggests that most, if not all, the benefit is psychological or would have taken place without the treatment.

2(c) Because mainstream medicine is, in general, far more rational than fringe medicine - just as for example in the non-medical world, astronomy is far more rational than astrology - it is hardly surprising that the real problem-solving and dramatic advances of the last hundred years, which have saved so many lives and improved the quality of life for so many people, have come from hard work and logical reasoning within mainstream medicine, This was helped by others basing their views on solid evidence rather than on mere conviction.

2(d) HealthWatch fears that much of the booming "alternative" health industry actually represents in some ways a somewhat unhealthy, backward step in public attitudes - away from reason and the logical, painstaking collection of reliable evidence and back to the realms of blind faith and superstition - thus distorting priorities and slowing down the sort of progress that we all want.

Diagnosis and safety

3(a) For the public to be safe with a non registered practitioner or healer, the diagnosis must be as certain as possible. Any later changes that may occur in the patient's condition must also be recognised, Much of the long and arduous training in medical schools is directed towards this problem. The person who is merely trained in a treatment technique is not equipped to be entrusted with this vital aspect of practice, except in most straightforward cases.

3(b) It follows that, if society and the NHS are currently determined to give some or all of such practitioners the dignity and credibility of approved registration after a course of training in their particular creed, theory, or techniques, with or without basic mainstream medical knowledge there will need to be a decision. It must be decided who should treat patients only after referral by a qualified doctor (as happens now with counselling or with physiotherapy) and who sees and treats patients without such a referral.

3(c) Because most complementary remedies seem to rely mainly on their ability to soothe and relax, or on their placebo effect, the danger of actual physical harm is small, but this is not always so and a constant watch needs to be kept on this aspect. Some patients are deceived into having such treatment as a substitute rather than as an addition to mainstream treatment - perhaps with tragic results.

3(d) Indirect harm can occur whenever there is delay in making the correct diagnosis; or when patients with distressing depression or psychological problems are given some fashionable but probably bogus diagnosis of non-psychological kind, which may lead to needless restrictions and fads and deny them the skilled help that they need.

Four common situations

4(a) For conditions that are not serious and that will usually clear up fairly quickly with or without treatment, simple unproven remedies will always be in demand and may do little harm, but many patients don't really need them and might be better off without them.

4(b) Taken for chronic incurable conditions such treatments may give psychological comfort and a feeling that at least something is being tried, When temporary spontaneous improvement occurs as it often does without any treatment, many patients have an understandable desire to believe that it was the last remedy to be tried that was responsible. Such treatment is best given as part of the support that all good doctors have always seen as an important part of their job.

4(c) Those who have a serious life' threatening condition, especially if it is one of the more serious kinds of cancer, increasingly show their ambivalent feelings by first having all the treatment advised by mainstream medicine because they do not trust fringe medicine to be in any way an adequate alternative, They then follow this with some unorthodox remedy. When this is done usually with no evidence that good results are any more common with the complementary treatment than they are without it - it is clear that total costs are increased.

4(d) Fourthly, those in good health (having fully recovered from some disorder - or perhaps having never been ill) are increasingly being persuaded that, rather than just hoping for continued good health they should now take some regular remedy or attend an unqualified practitioner for some regular procedure such as acupuncture, even when there is no good evidence that this will make any difference to whether or not they stay healthy. This is an increasingly popular practice and likely to be a serious drain on money and resources.

NOTE: In all these four situations a proper comparison between those patients having a particular remedy and those not having it is usually the only way to get at the truth; and allow the public to see what is best and what is second best or unnecessary.

Comparing results

5(a) As with "league tables" of any kind - for example, those comparing schools - comparisons can easily lead to false conclusions unless the groups being compared are alike, apart from how they are treated, No other way of doing this is nearly as reliable as randomisation, Patients who agree to it have one or other of two equally suitable treatments according to a chance number. This prevents the bias which would make it impossible to trust a casual comparison.

5(b) Whether the treatment is new or old, orthodox or alternative, there may be both advantages and disadvantages in each method, Nobody knows which will do the most good and the least harm in the long run. So this is not research" in the usual sense, but just suitable treatment, No patient should be regarded as a guinea pig". Much more needs a) be done to convince the public of this.

5(c) No one clinical trial or comparison can settle for ever whether or not some theory or technique is better than another, or better than a placebo. In both mainstream and fringe medicine trials making the same comparison have not always given the same result. But if; after excluding bias so far as is humanly possible, there is still conflict then we can say that the true difference, if any, must be small.

5(d) Another important source of bias is Publication Bias. Those with a vested interest in the result (whether drug companies, doctors, or complementary practitioners) may publish only certain results and not others. To prevent this HealthWatch urges the Labour Party to support a register of all clinical trials from their inception.

Conclusion

6(a) HealthWatch wants the best treatment for everyone - not second best or worthless or harmful - and a free choice based on as much reliable information as possible. We believe in results, whether or not the mechanism is understood.

6(b) To provide reliable evidence as to which method - whether in mainstream medicine or not - gets the best results there is a need for more reliable, formal comparisons of different policies, no matter how much variation there is for individual patients. The history of medicine shows that mere impressions are often not to be trusted.

6(c) This is also the case with complementary treatment given in addition to the main treatment. Without a proper comparison, it is difficult, if not impossible, to know whether or not adding this extra treatment is having any useful effect - or doing any harm.

6(d) We fear that for the NHS at this time to expand its use of untested remedies by unsupervised and/or relatively unqualified persons could divert money, time and resources from where they will do most good.

[Top of page](#)

Interview with Professor Edzard Ernst

New complementary Professor stresses 'scientific rigour'

The first chair of Complementary Medicine in Europe, - the Laing chair - was recently taken up at Exeter University by Professor Edzard Ernst. He was previously professor of Physical Medicine and Rehabilitation in Vienna, Dr Thurstan Brewin, chairman of HealthWatch, talked to him just before his packed inaugural address.

BREWIN: If you were asked for just one or two fairly simple aims that you bring to your new post, what would you say?

ERNST: The simplest aim is to test the untested in medicine, whether it is complementary or orthodox - and to apply the same standards to both in terms of scientific rigour and scrutiny.

BREWIN: And what would you say is the best way of doing that?

ERNST: There is only one way - to establish causal links between the intervention and the outcome. The instruments for that exist in orthodox medicine and have been developed over the last 40 years or so. And, whatever other people may say, I feel they are applicable to complementary medicine.

Of course, one may have to modify them slightly. For example, we may be dealing with treatments that cannot be blinded - or compared with placebo. But in principle I believe very strongly in randomised, placebo-controlled trials.

BREWIN: How do you avoid the fear of some patients that they are then guinea pigs, that they are being experimented upon, that they are not getting proper treatment?

ERNST: I think this has to be faced in every branch of medicine. You have to talk to the patient. Sometimes it is very easy, sometimes not; I would try and convince the patient that he or she is not missing out.

If an active treatment exists, which has proved effective in a certain condition, then it is difficult to do a placebo-controlled trial. In this case I think the way to convince the patient to participate is to make clear that he or she is doing something good in terms of the advancement of science.

Placebo

Hopefully we are not dealing with a serious disease in the sense that it is life-threatening. For example, I don't see anything ethically wrong in treating something like migraine with placebo, or with something experimental, for a little while.

If we end up after this with some insight into treatment, then that particular patient is helping himself or herself, as well as others; and we are also getting nearer to eventual effective treatment.

BREWIN: May I ask you a question that is not often asked? If it is true that mainstream medicine is free to give any remedy, why do we have alternative medicine? Why do we need it?

ERNST: It's a very intriguing question. There are probably hundreds of answers. One would wish for more research into it.

Mystical

There seems to be some need in people for mystical things. This seems to be a human attitude, which we cannot erase.

Also there seems to be a great deal of dissatisfaction with orthodox medicine. We are looking into this. We have a questionnaire and it seems that many patients are fairly fed up with orthodox medicine.

They are not happy with its content or its style. I don't know why this is so. Is it that we have too little time for them? Too little empathy?

Sometimes the high tech stuff that we are handling in orthodox medicine scares them. They are also scared of the side effects of allopathic treatment.

Then there is something that has been called Health Information Fatigue. We open a newspaper and there is a health article. We open another and there is an article that appears to contradict it. Even if it's not actually contradictory, it may be confusing.

Simple Messages

Also people are very easily caught by simple messages; and complementary medicine offers these simple messages. They may be right or wrong. They are probably wrong. Any simple message in medicine is wrong, I think. But there's a market for it.

Finally I suggest that the more you pay, the more it's worth. It's therapeutic to pay out of your pocket.

BREWIN: Why do you think that the many different kinds of alternative medicine, with quite different beliefs, all seem to get a very similar percentage of apparent responses?

ERNST: I'm not sure if it's correct to say that. But the success rate is often close to the placebo rate. This is why it's so important to conduct proper studies. I've nothing against placebo therapy. Far from it. But we need to know if that is all it is.

I also like the idea of learning from complementary medicine why they are so good at applying placebo effectively. We should learn that trick. We should get back to what you call in England bedside medicine. It's so important for the patient.

Opinions expressed in letters and articles published in the HealthWatch Newsletter belong to the authors and do not necessarily reflect the views of HealthWatch. The editor reserves the right to amend text if necessary but will, where possible, consult the author to ensure accuracy is maintained. Letters and articles for publication are welcomed and should be addressed to: The Editor, HealthWatch Newsletter, HealthWatch, Box BM HealthWatch, London WC1N 3XX

Letters and articles may also be sent to the Editor by e-mail to: newsletter@healthwatch-uk.org

Copyright © 1994 HealthWatch.

[Top of page](#)
