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HOMEOPATHY – ITS POSITION IN MEDICINE IN EUROPE

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Definition of homeopathy

Homeopathy is a whole system of medicine with a refined system of diagnostics and treatment. It is based on the Similarity Principle, i.e. substances capable of causing disorder in healthy subjects are used as medicines to treat similar patterns of disorder experienced by ill people. Homeopathic medicines, prepared by homeopathic pharmacists from materials of botanical, chemical, mineral, or zoological origin, are aimed to direct and stimulate the body's self-regulatory mechanisms. Homeopathy is highly individualized while taking into account the symptoms and signs of the disease, the patient's physical build personality, temperament and genetic predispositions.

Practice of homeopathy in Europe

Approximately 45,000 medical doctors in Europe have taken training and education in homeopathy as a specific system of medicine. Many more doctors in Europe prescribe homeopathic (complex) medicines without homeopathic training (based on a conventional medical diagnosis): approximately 25-40 % of the GPs from time to time, 6-8 % of them on a more regular basis. Several hospitals in Europe provide homeopathic treatment by medical doctors in their out-patient departments, notably in Austria, France, Germany, Italy, Spain and the United Kingdom.

Homeopathy is also getting a place at universities. Familiarisation courses about homeopathy are provided in the medical undergraduate curriculum as a part of a course on Complementary and Alternative Medicine in France, Germany, Hungary, Italy, the Netherlands, Romania, Spain and the United Kingdom; as a separate subject in Belgium, Bulgaria, Germany and Romania. Postgraduate training courses in homeopathy for doctors are provided at universities in Bulgaria, France, Germany, Greece, Italy, Lithuania, Poland, Romania and Spain.

Statutory regulation

The regulatory status of homeopathy in Europe reflects the diversity of its acceptance, use and availability in the EU Member States. Due to a great variety of medical cultures and traditions in different parts of Europe, homeopathy looks back on a well-established tradition in some countries or is hardly recognized and available in others.

There are three main models used to regulate the practice of medicine, namely direct government-administered regulation, government-sanctioned self-regulation and independent self-regulation. These models differ in the depth of direct government involvement and are often used in tandem with other acts, which may regulate certain aspects of the health service and medical practice.

a. Direct government-administered regulation (most European countries): Government authorises, registers and supervises the health professionals. The authorities can withdraw the authorisation of health professionals if the law is violated.

b. Government-sanctioned self-regulation (some countries): The law delegates the tasks of authorisation, registration and supervision of health professionals to the national medical associations.

c. Independent self-regulation (some countries): Associations of individual therapies develop their own statistics, educational programmes, code of ethics, research programmes and standards of competence. In these countries, self-regulation is required for an association to be approved by the government.

These models differ in the depth of direct government involvement.

In the case of homeopathy the situation is as follows:

a. Direct government-administered regulation: Homeopathy is recognised as a distinct therapeutic system by law in Belgium (1999), Bulgaria (2005), Germany (1998), Hungary (1997), Latvia (1997), Portugal (2003), Romania (1981), Slovenia (2007) and the United Kingdom (1950).

b. Government-sanctioned self-regulation: □ Homeopathy is recognised as an additional medical qualification by the national medical councils/chambers in Austria, France, Germany, Hungary, Italy, Latvia, Lithuania, Romania, Spain, Switzerland. As a medical specialty in Latvia.

In other countries there is no specific regulation but medical doctors can practise homeopathy.

WMA declarations

As outlined above, homeopathy is regulated in several European countries either by law or by the national medical council/chamber. But even though homeopathy has not been officially recognised in other countries, medical doctors “have the freedom to exercise their professional judgment in the care and treatment of their patients without undue influence by outside parties or individuals”, as it is stipulated by the *Declaration on Professional Autonomy and Clinical Independence* of the World Medical Association (2008). That means that they can provide any treatment they find appropriate for their patients.

Of course, medical doctors should treat their patients to the best of their knowledge. The *Declaration on guidelines for continuous quality improvement in health care* of the World Medical Association states that: “The physician must always strive to maintain and increase his/her knowledge and skills. The physician shall recommend only examinations and treatments that are believed to be effective and appropriate according to the best available evidence-based medicine”.

Evidence-based medicine

That brings us to the concept of evidence-based medicine (EBM). This concept is not always well understood. According to the founders of EBM, Sackett and Feinstein, it is “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients”. Some other quotes from their work: “EBM is the use of both individual clinical expertise and the best available external evidence, and neither alone is enough. Without clinical expertise, practice risks becoming tyrannised by evidence, for even excellent external evidence may be inapplicable to or inappropriate for an individual patient”. “EBM is not restricted to randomised trials and meta-analyses. It involves tracking down the best external evidence with which to answer our clinical questions”. “EBM is not ‘cookbook’

medicine. It requires a bottom up approach that integrates the best external evidence with individual clinical expertise and patients' choice".

A widespread assumption in this context is that conventional Western medicine is evidence-based and homeopathy is not. But is that assumption really true?

At the British Medical Journal Clinical Evidence website a pie chart is shown of the evidence for the effectiveness of conventional medicine. It says that of around 2,500 conventional medical treatments covered, 13% are rated as beneficial, 23% likely to be beneficial, 8% as trade off between benefits and harms, 6% unlikely to be beneficial, 4% likely to be ineffective or harmful, and 46%, the largest proportion, as unknown effectiveness.

Evidence-based homeopathy

And how about the evidence for the effectiveness of homeopathy? There are hundreds of thousands of case histories, recording successful cases. There are a considerable number of outcome studies providing consistent results in improving not only the presenting symptoms but also overall well-being and in reducing the use of conventional prescription drugs. The majority of patients in these surveys have chronic conditions, and many have multiple pathologies and have not responded to previous conventional treatment.

The concept of evidence is multi-faceted as I explained before, but in recent years it has become progressively reduced to accepting randomised controlled trials (RCTs) as the gold standard. While RCTs can be useful in assessing the effects of a single intervention on a single symptom or outcome, they are far less suitable when studying the overall effects of a holistic therapy such as homeopathy in a complex organism with multiple problems. Nevertheless there have been a number of RCTs in homeopathy with far more positive than negative outcomes. From a total of 142 RCTs published in peer-reviewed journals from 1950 to 2009 inclusive, 120 (85%) were placebo controlled. The other 22 RCTs (15%) were controlled by other than placebo. Of the 142 trials overall, the summary finding was positive in 44%, negative in 8% and statistically non-conclusive in 48%.

Five comprehensive systematic reviews of RCTs in homeopathy, in which the effect of homeopathic treatment on a whole range of medical conditions was examined collectively, have been published and four of them concluded that homeopathy differs from placebo. The fifth systematic review concluded there was "weak evidence for a specific effect of homeopathic remedies"; the methodology of that review and its conclusions has been challenged. The value of any comprehensive systematic review, however, is limited because the trials are extremely heterogeneous not only in results but also in the interventions and health conditions under study and homeopathy may work in some but not all indications.

The issue of heterogeneity of medical condition has been avoided in each of 17 systematic reviews that have focused, to date, on homeopathy RCTs in one of 16 particular clinical conditions. Five systematic reviews concluded there was positive evidence for homeopathy, notably in childhood diarrhoea, post-operative ileus, seasonal allergic rhinitis, and vertigo. In addition, replicated RCTs show positive evidence for homeopathy in fibromyalgia and sinusitis.

Critics argue that homeopathy is something like a super-placebo. The long interview carried out by an empathetic doctor, which is usual in individualised homeopathy, may explain why people report improvements in their health. However, in a recent study a team of German

researchers demonstrated that the placebo effect in placebo-controlled double-blind RCTs in individualised homeopathy is not higher than in conventional treatment.

Working mechanism of homeopathy

Critics also argue that all positive evidence for homeopathy is not reliable because there is no scientific explanation for it, especially for the effects of ultra molecular homeopathic preparations. A Dutch cartoon reflects this perspective. The one researcher tells the other one: "Your results look most impressive, but does it also work in theory?"

These critics are not aware that high-quality and repeated experiments on intact animals, plants and isolated cells and cell cultures have demonstrated that even very high dilutions can have effects. Repeatable results include inhibition of basophil activation by ultramolecular dilutions of histamine, the effect of ultramolecular dilutions of aspirin on blood clotting; and the effect of ultramolecular thyroxine on the rate of metamorphosis of frogs. Several experiments detected structural anomalies of water in ultramolecular homeopathic preparations. Methods include low temperature thermoluminescence, flux calorimetry, conductometry, Raman and Ultra-Violet-Visible spectroscopy and Nuclear Magnetic resonance. That means that the contention that homeopathy is implausible or impossible is untenable.

External evidence vs. clinical experience

We can therefore conclude that there is some good evidence for the effectiveness of homeopathy and that there is good evidence for approximately 36% of conventional medical treatments. In fact, **both in conventional medicine and in homeopathy most treatments are based on clinical experience**, i.e. the perceived effectiveness in actual practice. Everyone would like to have more results from systematic research, but if doctors would only be allowed to provide treatment of which the effectiveness has been demonstrated by hard scientific evidence, doctors would lose many tools, both conventional and homeopathic, for their practical medical work. Patients will certainly not be pleased with that option.

Position of homeopathy in medical practice

Not any homeopathic doctor will prescribe homeopathic treatment if a more effective conventional treatment is available and possible. Especially because homeopathic doctors have taken training and education in both conventional Western medicine and homeopathy, they know when the one or the other is indicated. The ethical framework shows that

- if a treatment is safe and effective, it should be recommended
- if a treatment is safe and possibly effective (or ineffective), it should be carefully monitored
- if a treatment is unsafe and possibly effective (or ineffective), it should also be carefully monitored
- if a treatment is unsafe and ineffective, it should be advised against.

There is widespread assumption that homeopathy can only be used in simple, self-limiting diseases. Reality is that homeopathy can be effective in patients with all kinds of acute and chronic diseases. That is exactly the reason why it is so important that homeopathy is used by practitioners with a full academic medical education, i.e. medical doctors. Just for your information I would like to show you the covers of some books:

- Homeopathy in intensive care and emergency medicine

- Homeopathy in gynaecology

These two books are written by medical specialists with additional training and education in homeopathy and are just some examples showing the role homeopathy can play in particular medical specialties.

Conclusion

Homeopathy is widely practised by medical doctors in Europe and statutorily regulated in many EU Member States. The experience of these doctors that homeopathy can be effective in many medical conditions is increasingly supported by external evidence.

By virtue of their training and education in both conventional Western medicine and homeopathy, homeopathic doctors know which treatment, conventional or homeopathic or a combination of the two can help patients in the best possible way in specific medical conditions.