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Observations About Health Policy in Integrative Medicine

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Observations About Health Policy in Integrative Medicine

It is widely estimated that one-third to one-half of the American public are now seeking and using complementary and alternative therapies (CAM)¹. The prevalence of CAM is an important public health issue that requires greater attention and enhanced understanding by health care consumers, the health professions and policy makers.

Many people using CAM do not consult or inform their physician about this use, partially due to a general belief that the medical profession historically has been indifferent to it. Concurrently, the health professions often lack a full understanding of CAM in an environment where these therapies may be marketed irresponsibly and used inappropriately, leading to potentially undesirable consequences for patients and physicians. Consumers and health professionals can gain increased knowledge of the value and appropriateness of CAM through continued gathering and dissemination of objective and accurate information on the effectiveness of these therapies through scientific observation and evaluation. In fact, the term integrative medicine itself implies an active, conscious effort on the part of the health professions to appropriately incorporate CAM into the continuum of care. What are the implications for medical research, training and practice?

Modern medicine is highly effective at treating many medical problems. Powerful and effective procedures, sophisticated surgery and prescription drugs literally have performed medical miracles. While receiving the benefits of modern medicine, those using CAM generally feel they want to take a more active role in managing their health and to have available other therapeutic options. Modern medical science is beginning to show that many complementary therapies may be helpful when used appropriately for common complaints of pain and discomfort associated with many medical conditions.

Many people are willing to pay for CAM out-of-pocket, and they trust alternative practitioners to provide it. This observation is important and at-the-heart of current concerns about the costs of health care and the role of third party payers. People also report that they generally trust CAM practitioners and appreciate the extended time they are able to spend in consultation and treatment with them. However, not all people are comfortable discussing their use of alternative treatments with their regular physicians, and not all physicians are comfortable discussing CAM with their patients. The present situation represents a potential public health risk. Support is needed for education, training and cross-training of health professionals, and for reliable sources of consumer information. It is also important to develop a better understanding through appropriate population research of what current consumer choices and actions mean for the future of integrative medicine and health.

While scientific investigation is beginning to differentiate between CAM therapies that work and those that do not, it has also become apparent that not all therapies work equally well for all using them and that some therapies may not be appropriate for everyone. More information is needed on the factors that determine the responses of different individuals to properly administered therapy. Understanding this individual variation in response to CAM therapy is a key to the approach of integrative

medicine. Research on these observations will help build a more solid base for personalized care. Given that some CAM modalities work for some patients, from a workforce standpoint, are there practitioners available to provide appropriate integrative care²?

It is also important to study the cost-effectiveness of integrative medicine. On the one hand, integrative medical care ideally requires more time by the practitioner with the client, which is highly valued by both client and practitioner. On the other hand, CAM procedures may be less costly and have fewer known side effects. Part of the current cost of health care lies in management of the known and accepted side effects of regular therapy, which may be lower with integrative medicine.

The ultimate risk may lie in the use of CAM by clients without informing their regular physicians, or consulting them about safety, appropriateness, effectiveness, and interactions with prescription drugs and medical procedures. An informed professional opinion when facing the unknown is a key component of integrative medicine. It is important to develop a broader understanding of the role of integrative medicine in managing these risks, as well as its potential role in the national patient safety initiative for the reduction of medical errors.

Progressive elements of the natural products and dietary supplement industry are recognizing that voluntarily developing and providing improved medical and scientific information about ingredients (consistent with the Dietary Supplement Health and Education Act of 1994) anticipates the higher standards required by the health professions for integration.

In addition to helping with individual complaints, integrative medicine may help improve wellness and promote a healthier population through lifestyle modification, stress reduction and other healthy behaviors³. While clinical trials research continues on the use of alternative therapies to help specific medical problems, other research efforts should be expended to study the ability of integrative medicine to help prevent disease and promote health in the general population.

The Policy Institute for Integrative Medicine (PIIM) is located at Thomas Jefferson University Hospital and chaired by Ira Brind, who also serves as Chairman of the Board of Trustees of the hospital. The institute was inaugurated on September 30, 2002, with the visit to Philadelphia of U.S. Senator Tom Harkin (D-Iowa), who co-chairs the Congressional Caucus on CAM and Dietary Supplements in the Senate with Orrin Hatch (R-Utah). PIIM develops consortial relations and support for analyses in integrative health care and presents information and recommendations to help inform policymakers, the general public and the health professions. The Center for Integrative Medicine and the Office of Health Policy and Clinical Outcomes at Jefferson are ideally positioned to participate in these analyses and reviews. Among PIIM's present projects:

- Working with members of the Congressional Caucus on CAM to educate Congress and to help develop support for a broader federal investment in integrative medicine research, education and practice.
- Meeting with the senior health policy advisor to the US Senate Special Committee on Aging to hold hearings in 2003 on the September 2001 GAO Report on Health Products for Seniors.

- Developing a three-part proposal for collaborative analyses through the Palmer College Center for Consortial Research, Davenport, Iowa, including development of multidisciplinary consensus processes and evidence-based guidelines for best practices in managing chronic or episodic recurrent low back pain.

References

1. Wooton JC, Sparber A. Surveys of complementary and alternative medicine usage: a review of general population trends and specific patient populations. *Seminars in Integrative Medicine*. In press.
2. Micozzi MS. Complementary care. What is appropriate? Who will provide it? *Ann Intern Med* 1998;129:65-66.
3. Micozzi MS. *Fundamentals of Complementary and Alternative Medicine*, 2nd ed. New York, NY: Churchill-Livingstone (Elsevier Health Sciences), 2001.

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