

GUEST EDITORIAL

THE EFFECT OF STATUTORY REGULATION OF OSTEOPATHY AND CHIROPRACTIC ON RESEARCH ACTIVITY IN THE UK

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Since 1993/4, UK chiropractors and osteopaths have been regulated by statute: in contrast, all other practitioners of complementary and alternative medicine (CAM) in the UK are not regulated in this fashion. A report by the country's House of Lords' Select Committee on Science and Technology recommended tighter regulation of the CAM sector, and the introduction of 'guidelines on competency and training'.¹ As a result, UK acupuncturists and medical herbalists are currently trying to achieve statutory regulation, and other CAM professions will no doubt follow in due course.

Virtually all experts agree that CAM is grossly under-researched and that even the most fundamental questions about efficacy and safety cannot, therefore, be answered. Regulation should be a step towards professionalism, which, in turn, should stimulate research activity and eventually lead to answers to the most pressing open questions. We wanted to test whether the regulation of the UK osteopathic and chiropractic professions had any impact on the research activity in these areas.

The PubMed electronic database was searched for articles categorised as either clinical trials or meta-analyses limited to human subjects and written in

English. The search terms were 'osteopath*', 'chiropract*' and 'spinal manip*' limited to the title or abstract. Each search was conducted first for the period 1988–1992 and then for the period 1995–1999, the 5-year periods immediately before and after the 2-year period (1993/4) during which regulation of chiropractic and osteopathy in the UK was instituted. Articles were downloaded to *Reference Manager* and those retrieved using the spinal 'manip*' search term, and which duplicated those retrieved with the other two search terms, were deleted ($n = 20$). Articles that did not relate to osteopathy, chiropractic or spinal manipulation were also excluded ($n = 3$). The country of origin of each article was identified from the affiliation of the first author given in the abstract. If this information was missing from the PubMed entry ($n = 5$), the full article was retrieved.

Our searches identified 89 different articles, 26 in the period 1988–1992 and 63 in the period 1995–1999 (Table 1). Of these, 9 originated in the UK, 6 from the period predating regulation (3 clinical trials, 3 commentaries) and 3 from the period after regulation (1 clinical trial, 2 papers on diagnostics).^{2–10}

These data do not support the hypothesis that regulation of a healthcare field will increase research

Table 1. Summary of PubMed search results

Search term	Listed as	All countries		UK	
		1988–1992	1995–1999	1988–1992	1995–1999
'Osteopath*'	CT	1	4	12	0
	Meta-analyses	0	2	0	0
'Chiropract*'	CT	20	40	5 ³	3 ^{8 10}
	Meta-analyses	0	1	0	0
'Spinal manip*'	CT	3	12	0	0
	Meta-analyses	2	4	0	0
TOTAL		26	63	6	3

CT, clinical trial.

activity in that area. During a period when the number of clinical trials and meta-analyses of osteopathy, chiropractic and spinal manipulation published world-wide increased by 142%, research activity in the UK seemed to decline. This is a disappointing result, particularly considering the uncertainty about whether these treatments do more good than harm for patients. Regulating uncertainties, it seems, generates regulated uncertainties rather than certainties. Arguably, professionalism and competency require research; current initiatives in regulating CAM should consider this and insist that research is an integral part of any regulated healthcare profession.

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