

Medicines that contain no medicine and other follies

*The government often says that it takes the best scientific advice but the Department of Health seems to have something of a blank spot when it comes to alternative medicine, says **David Colquhoun***

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On May 23rd 2006 a letter was sent to the chief executives of 467 NHS trusts. It was reported as a front page story in *The Times* and it was the lead item on the *Today* programme. The letter urged the government not to spend NHS funds on “unproven and disproved treatments”. Who can imagine anything more simple and self-evident than that? But in politics nothing is simple.

It turns out that quite a lot of patients are deeply attached to unproven and disproved treatments. They clamour for them and, since “patient choice” is high on the agenda at the moment, they quite often get them. Unproven and disproved treatments cost quite a lot of money that the NHS should be spending on things that work.

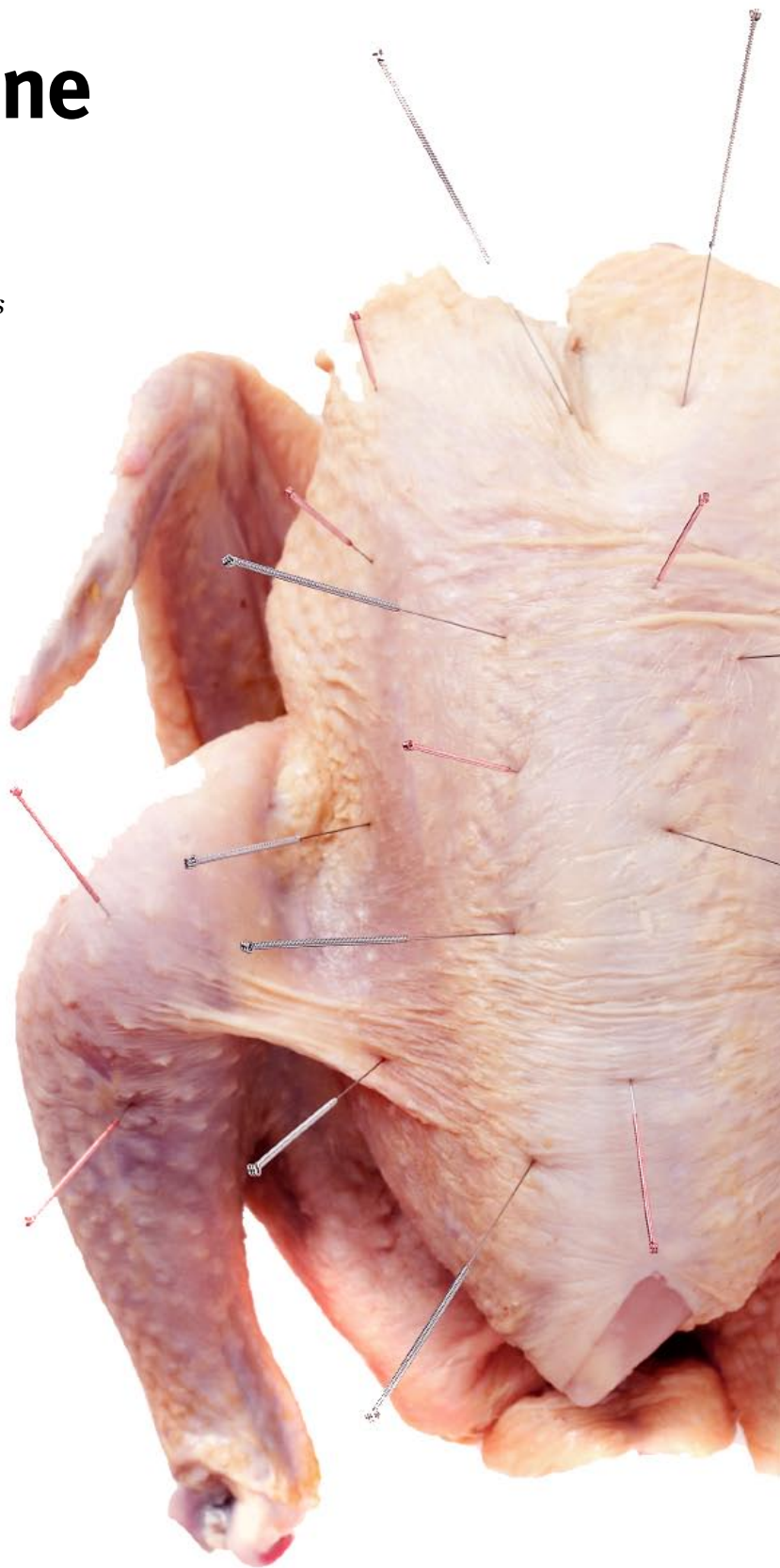
In January 2007, the Association of Directors of Public Health issued its own list of unproven and disproved treatments. It included, among others, tonsillectomy and adenoidectomy, carpal tunnel surgery and homeopathy. They all matter, but here I’ll concentrate on alternative treatments, of which homeopathy is one of the most widespread.

It should be simple. We have a

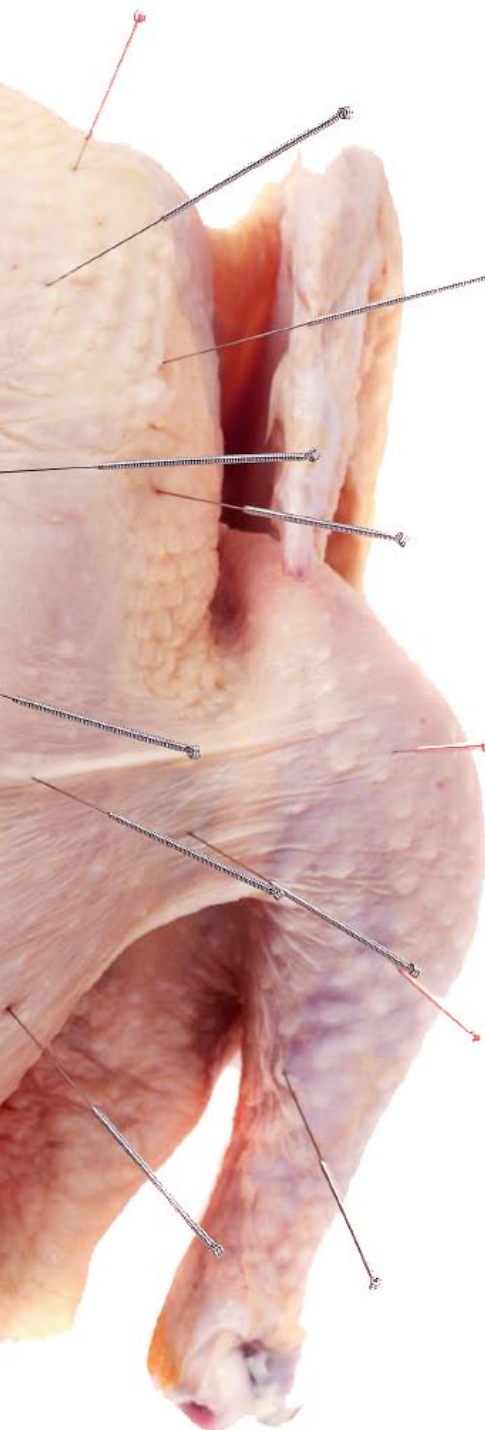
good mechanism for deciding which treatments are cost-effective in the form of the National Institute for Clinical Excellence. If homeopathy and herbalism are not good ways to spend NHS money, why has NICE not said so? The answer to that is simple. NICE has not been asked. It can consider only those questions that are referred to it by the Department of Health.

The government often says that it takes the best scientific advice but the DoH seems to have something of a blank spot when it comes to alternative medicine. Nobody knows why. Perhaps it is the dire lack of anyone with a scientific education in government. Or could there be something in the rumour that the DoH lives in terror of being at the receiving end of a rant from the general direction of Clarence House if it doesn’t behave? Whatever the reason, the matter has still not been referred to NICE, despite many requests to do so.

A judgement from NICE would be useful, but it is hardly essential. It isn’t hard to understand.



“.....
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At its simplest the whole problem can be summed up very briefly:

- Homeopathy: giving patients medicines that contain no medicine whatsoever
- Herbal medicine: giving patients an unknown dose of a medicine, of unknown effectiveness and unknown safety
- Acupuncture: a rather theatrical placebo, with no real therapeutic benefit in most if not all cases
- Chiropractic: an invention of a 19th century salesman, based on nonsensical principles, and shown to be no more effective than other manipulative therapies, but less safe.
- Reflexology: plain old foot massage, overlaid with utter nonsense about non-existent connections between your feet and your thyroid gland.
- Nutritional therapy: self-styled 'nutritionists' making unjustified claims about diet to sell unnecessary supplements

Of these, 'nutritional therapy', or 'nutritional medicine', is a relative newcomer. At their worst, they claim that vitamin C can cure AIDS and have been responsible for many deaths in Africa. There isn't the slightest need for them since the nutrition area is already covered by registered dietitians who have far better training.

There have been several good honest summaries of the evidence that underlies these interpretations, written in a style quite understandable by humanities graduates. Try, for example, *Trick or Treatment* (Singh & Ernst, Bantam Press 2008). A copy should be presented to every person at the DoH and every NHS manager. In some areas the evidence is now quite good. Homeopathy, when tested properly, comes out no different from placebo. That is hardly surprising because the 'treatment' pill contains no medicine so it is the same as the placebo pill.

Acupuncture has also been tested

well in the last 10 years. A lot of ingenuity has been put into designing sham acupuncture to use as a control. There is still a bit of doubt in a few areas, but overwhelmingly the results show that real acupuncture is not distinguishable from sham. Acupuncture, it seems, is nothing more than a particularly theatrical placebo. All the stuff about meridians and "Qi" is so much mumbo-jumbo. In contrast, herbal medicines have hardly been tested at all.

It is quite easy to get an impression that some of these fringe forms of medicine work better than they do. They form efficient lobby groups and they have friends in high places. They long for respectability and they've had a surprising amount of success in getting recognised by the NHS. Some, like chiropractic, have even got official government recognition.

One can argue about whether it was money well-spent, but in the USA almost a billion dollars has been spent on research on alternative medicine by their National Center for Complementary and Alternative Medicine which was set up as a result of political pressure from the huge alternative medicine industry. That has produced not a single effective alternative treatment but at least it has shown clearly that most don't work.

The letter of 23 May 2006 proved to be remarkably effective. Tunbridge Wells Homeopathic Hospital has closed and commissioning of homeopathic services has fallen drastically. That has released money for treatments that work and providing treatments that work is the job of the NHS.

It is sometimes asked, what is wrong with placebo effects as long as the patient feels better? First it must be said that much of the apparent benefit of placebos like homeopathy isn't a placebo effect but merely spontaneous recovery. Echinacea cures your cold in only seven days when otherwise it would have taken a week. But when there is a genuine psychosomatic placebo effect, it can be a real benefit. As always, though, one must

consider the cost as well as the benefit.

And there are a lot of hidden costs in this approach. One cost is the need to lie to patients to achieve a good placebo effect. That contradicts the trend towards more openness in medicine. And there is a major cost to the taxpayer in the training of people. If the NHS employs homeopaths or spiritual healers because they are nice people who can elicit a good placebo effect, the human resources department will insist that they are fully-qualified in myths. "Full National Federation of Spiritual Healer certificate or a full Reiki Master qualification and two years post certificate experience" (I quote). That is one reason why you can find in UK universities, undergraduates being taught at taxpayers' expense, that 'amethysts emit high yin energy'.

There is a solution to all of this. There is room in the NHS for nice, caring people, to hold the hands of sick patients. They might be called 'healthcare workers in supportive and palliative care'. They could do a good job, without any of the nonsense of homeopathy or spiritualism. Likewise, manipulative therapists could get together to dispense with the nonsense elements in chiropractic and to make a real attempt to find out what works best.

All that stands in the way of this common sense approach is the rigidity of human resources departments which demand formal qualifications in black magic before you can cheer up sick patients. The over-formalisation of nonsense has done great harm. You have only to note that Skills for Health has listed 'competences' in Distant Healing (in the presence of the client or in the absence of the client).

When I asked Skills for Health if they would be defining a 'competence' in talking to trees, I was told, in all seriousness, "You'd have to talk to LANTRA, the land-based organisation for that".

I'm not joking. I wish I were.