

What's the future of healthcare?

Deb Hoy explores the question posed by Professor David Peters at a recent conference for complementary therapists in Birmingham, UK.

As a clinician and researcher Professor David Peters is well placed to comment on the pivotal position of the National Health Service in the UK, and as an advocate for complementary and alternative medicine, was adept at relaying details of recent changes to the lay people and therapists attending. He presented a vision for opportunities to integrate healthcare with social services, to move toward more holistic treatment methodologies, while balancing this potential for a 'golden age' with very real concerns about the adverse effects of imminent privatisation.

In April 2013, the Primary Care Trusts – regional units responsible for delivering NHS care across the country – were replaced with Clinical Commissioning Groups. These groups could potentially become hubs of wellbeing, bringing together representatives from healthcare, social care and local authorities to deliver a complete package that Peters terms 'bio-psycho-social-healthcare'. Could this mélange lead us away from the reductive approach that's prevailed in western medicine in the modern age?

Perhaps the keyword lies in the title of these new quangos: 'Commissioning'. They are in effect each designing their own healthcare provisions and contracting independent and private companies to carry out those required services. An example of this can be seen in the recent outcry in Norfolk about the amount of NHS money spent on private ambulances, while paramedic and public ambulance services remain in deficit. Contracting services is not new, but with the creation of the Clinical Commissioning Groups, it opens the door for private companies to tender for

many more services, making the services profit-driven, which could result in varied quality and availability of care across the UK.

Professor Peters comments: "the fact that more services will be localised could be beneficial. The NHS mandate looks good, with words like dignity, compassion, and respect, showing a focus on whole person-centered care". He also warns that with the current cost of care soaring year on year (particularly for people with long-term conditions) the NHS simply cannot sustain itself. Many within the profession are preparing to see hospitals shrink, services diminish, and frontline staff take on increased working hours, with less manpower to meet rising demands, all of which could reduce the quality of care, and the quality of life for those delivering care.

Despite this prophesy, Professor Peters' address offers a glimmer of hope. At this crucial time in the life of a national state-funded healthcare system he believes "CAM [Complementary and Alternative Medicine] is a signpost towards what's missing from the mainstream". The NHS mandate highlights the values that CAM offers. Because CAM services and practitioners normally operate on a small scale (as sole traders, or small regional groups of practitioners) they are more personal. Many of them combine mind-body medicine, considering the context and environment of each individual along with their symptoms. CAM practices are often participatory: they encourage the patient to actively engage with his or her healing process, helping service users to take responsibility for their healing and providing education on how to do so, which encompasses all aspects of lifestyle.

In this respect, CAM can be particularly helpful for the costly long-term patients that the NHS struggles to cure. At the same time, most complementary therapies are low-tech and low-risk. They are not corporate-led or driven by big business.

Peters says: "If CAM practitioners can become experts in self-care, then we will reduce the number of people going to see a GP". Using new technology it is possible to scientifically measure some of the contributing factors of ill-health, (those that CAM has always taken into account) namely the correlation between emotional states and physical health. It is widely accepted that the stress response (adrenaline and cortisol release) affects the resiliency of the body's whole system over a long period of time, which can lead to chronic illness. Depression is a common aspect of many chronic conditions such as osteoarthritis, IBS, fatigue, migraine, lower back pain, anxiety, insomnia and stress. Most CAM practices counteract the stress response, helping the body to come into a state of relaxation, which brings it back to homeostasis – the optimal conditions for good health. While alleviating depression and educating patients about lifestyle changes, CAM can provide respite and recovery for patients that currently cost the NHS a large proportion of its budget, and do so at a fraction of hospital running costs.

Sometimes it's hard for doctors to grasp the subtlety of CAM's effects, because they are trained to look for specific evidence based results, which often discount the context and environment surrounding a targeted symptom. Following on from David Peters address, Professor Paul Dieppe unpicked the shortcomings of randomised controlled trials (RCTs), which form the basis of all evidence-based medicine (EBM).

In his lecture 'Empirical Science or Vitalism' Dieppe showed how RCTs fail to acknowledge the overwhelming statistics showing the effectiveness of placebos, and discredit the repeated cases of control groups whose symptoms or conditions improve despite them receiving no treatment at all. His argument is that the pharmaceutical companies funding randomised controlled trials simply alter the focus of tests to steer research away from the fact that the body heals itself, and disallow any positive effects the administering practitioner can have on a patient's wellbeing. Dieppe calls for a new

approach to research and different ways for measuring the effects of CAM in patients with chronic illness. Conference organiser David Balen (founder of Balens Specialist Insurance Brokers) shares this approach and is pioneering new methods to collect qualitative data and patient feedback as evidence of the holistic improvements and positive changes that occur as a result of receiving CAM therapies.



At a time when the NHS is calling out for more low-cost, high-quality treatment plans and actively encouraging the public to take their healthcare into their own hands, many dedicated CAM practitioners who have quietly been sharing tools to bring mind-body into balance for years, may soon see new ways to scientifically validate their work and unite with social, environmental and healthcare leaders to pioneer 'bio-psycho-social-healthcare' for the future. In layman's terms, now is our chance to help the public take diet, lifestyle, and wellbeing into consideration, showing how happiness can lead to good health, and using the skills we have honed on the periphery of the medical profession to empower people to heal themselves. □

'Empirical Science, Vitalism or what?' was held at the Holistic Health Fair, Birmingham NEC 19th and 20th May. This was a CPD event for complementary therapies, hosted by Balens. Details of the presentations can be found at www.balens.co.uk. Balens provides specialist insurance for health and wellbeing professionals and organisations. Reiki practitioners can obtain comprehensive and affordable cover through the Reiki Association members' block scheme.

Above:
Reiki
treatment in
progress