

## **Complementary and Alternative Treatment**

Complementary and alternative medicine (CAM) continues to grow in popularity and is widely used by consumers of conventional health services. This can pose challenges for qualified doctors practicing conventional medicine in a number of ways. This article discusses the obligations of qualified doctors in relation to CAM when they provide such treatments themselves.

Some doctors choose to provide CAM therapies in addition to conventional medical services. The Medical Council of New Zealand's Statement on CAM provides guidance for doctors choosing to provide CAM therapies.

The starting point of any such treatment is informed choice and informed consent from the consumer. In order for a consumer to provide informed consent, they require relevant information. Right 6 of the Code of Rights sets out the requirement to provide information to a consumer and states that 'every consumer has the right to the information that a reasonable consumer, in that consumer's circumstances, would expect to receive'. As an overarching principle, the information provided by doctors pursuant to right 6 should be balanced, fair and provide the information that a reasonable consumer would expect in those particular circumstances.

Where doctors provide CAM therapies, a reasonable consumer is entitled to receive information about the nature of the treatment, any associated risks, the theory or foundation on which it is based, the extent to which it is consistent with conventional theories of medicine and whether it is supported by the majority of conventional doctors.

Doctors providing CAM are obliged to give more information and place it in a wider context than CAM practitioners who are not qualified doctors. This greater obligation takes into account the additional training and expertise of the doctor. Where a CAM therapy is scientifically researched and has an established evidence base, the doctor should place the information about the treatment in that context. For example, acupuncture appears to be supported by a number of studies for treatment of chronic pain. A doctor providing acupuncture should explain the evidence base for acupuncture and should also provide information about the conventional options available for the presenting condition. However, an acupuncturist without medical training would not be obliged to discuss conventional alternatives and a consumer could not reasonably expect them to be able to provide information about this.

Similarly, if there is no evidence base or the CAM treatment is based on a theory not supported by conventional medicine, then this information should be provided to the consumer. Consumers have the right to have this information regardless of the doctor's beliefs about the efficacy of the CAM therapy.

This may appear onerous to a doctor providing CAM therapies, however it takes into account the full scope of practice of the doctor and addresses the 'dual' role that a doctor providing CAM plays. Their conventional training can grant greater authority to whichever treatment they recommend. Therefore, it is critical to accurately and carefully locate CAM therapies in the spectrum of services that they provide and avoid borrowing authority from medicine.

Discussion of the costs of the treatment is also important. As the MCNZ statement on CAM therapies recognises, cost is particularly significant when the consumer has a chronic or terminal

condition and limited alternative options. In such circumstances, consumers can be particularly vulnerable. Care should also be taken to provide information about cost if the CAM therapy is expensive or unfunded.

Moving beyond the provision of information, doctors providing CAM therapies will be expected to comply with the requirements of Right 4 of the Code of Rights to provide services with “reasonable care and skill”. The MCNZ statement clarifies that doctors will be expected to take a full history, examine the patient and carry out diagnostic tests in making their diagnosis. Particular care will have to be taken in utilising CAM diagnostic techniques. Such methods should be placed in the overall context of accepted practice in the profession and any limitations carefully explained to the consumer. The MCNZ Statement notes that diagnosis should be reached by using “a diagnostic system demonstrated by appropriate research methodologies to have a high level of accuracy and proven benefits”.

If the consumer has a regular GP in addition to a doctor providing CAM, then it is critical that there is clear and accurate communication between both doctors. The onus for sharing information about CAM therapies rests with the doctor providing CAM. All CAM and any other therapies provided to the consumer should be documented and the regular doctor routinely advised about the treatment. This ensures that the consumer is receiving continuity of care and that all clinicians providing care to the consumer have relevant information.

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*NZ Doctor, 13 June 2017*