ABC of complementary medicine

Users and practitioners of complementary medicine

Catherine Zollman, Andrew Vickers

Complementary medicine seems to be becoming more popular in Britain. Media coverage, specialist publications, and numbers of complementary therapists have all increased dramatically in the past 20 years. In this chapter we analyse this phenomenon and review available evidence about the use of complementary medicine.

Surveys of use

Several surveys, of varying quality, have been undertaken, but interpretation is not straightforward. Some studies targeted practitioners, whereas others surveyed patients and consumers. Different definitions of complementary medicine have been used—some include only patients consulting one of five named types of complementary practitioner, while some include up to 14 different therapies and others include complementary medicines bought over the counter. When treatments such as hypnosis are given by conventional doctors or within conventional health services, patients and surveys may not register them as "complementary." However, it is possible to make estimates from the available data, which help to chart the development of complementary practice.

Levels of use

How many people use complementary medicine?

The most rigorous UK survey of use of complementary medicine estimated that, in 1993, 33% of the population had used some form of complementary medicine and that over 10% had consulted a complementary practitioner in the previous year. Surveys of patients with chronic and difficult to manage diseases—such as cancer, HIV infection, multiple sclerosis, psoriasis, and rheumatological conditions—give levels of use up to twice as high.

Comparisons can be made with figures from other countries, although variations may be partly due to differences in survey methodology.

How extensively is complementary medicine used?

Attempts have been made to estimate the number of complementary medicine consultations taking place in the United Kingdom. In 1993 there were about 12 million adult consultations in the six major complementary disciplines. Average consultation rates were 4.3 per patient. Estimates based on the increased number of registered complementary practitioners suggest that at least 15 million complementary medicine consultations took place in 1997, about 5% of the number of general practice consultations.

Which therapies are used?

The media often emphasise the more unusual and controversial therapies, but surveys show that most use of complementary therapy is confined to a few major disciplines. Osteopathy, chiropractic, homoeopathy, acupuncture, and herbalism are among the most popular in the United Kingdom. Spiritual healing and hypnotherapy are also often mentioned. These figures mask variations in the use of individual complementary therapies among various subsections of the population. For

Use of complementary medicine in UK surveys

	% of sample using complementary medicine		No of types of therapy
Survey	Ever used	In past year	surveyed
Research Surveys of Great			
Britain (RSGB) 1984	30%*	No data	14
Gallup 1986	14%	No data	6
Which? 1986	No data	14%	5
MORI 1989	27%*	No data	13
Thomas 1993†	16.9% (33%*)	10.5%	6‡

Data from Sharma 1995 and Research Council for Complementary Medicine 1998. *Includes over the counter medicines. †Most rigorous study to date. ‡Plus "Other CM practitioner."



Numbers of specialist publications for complementary medicine are growing

Use of complementary medicine worldwide

% of sample using complementary medicine

Country	Seeing a practitioner	Using any form of treatment	
United Kingdom	10.5% in past year	33% ever	
Australia	20% in past year	46% in past year	
United States	11% in past year	34% in past year	
Belgium	24% in past year	66-75% ever	
France	No data	49% ever	
Netherlands	6-7% in past year	18% ever	
West Germany	5-12% in past year	20-30% ever	

Data from surveys during 1987-96.

Most popular complementary disciplines in UK surveys

To	p five	e therapie	s in survey

RSGB 1984	Which? 1986	MORI 1989*†	Thomas 1993†
Acupuncture	Acupuncture	Acupuncture	Acupuncture
Chiropractic	Chiropractic	Chiropractic	Chiropractic
Herbal medicine‡	Herbalism	Faith healing	Herbalism
Homoeopathy	Homoeopathy	Homoeopathy	Homoeopathy
Osteopathy	Osteopathy	Osteopathy	Osteopathy

Data from Sharma 1995 and Research Council for Complementary Medicine 1998. *Did not include herbalism. †Asked about consultations with complementary practitioners only. ‡Included over the counter products.

example, although women use more complementary medicine overall, men are more likely to consult osteopaths and chiropractors.

The popularity of different complementary therapies varies considerably across Europe. This reflects differences in medical culture and in the historical, political, and legal position of complementary medicine in these countries.

Reasons for use

There are many myths and stereotypes about people who turn to complementary medicine—for example, that they have an alternative world view which rejects conventional medicine on principle or that they are lured by exaggerated advertising claims. The research evidence challenges such theories.

Qualitative and quantitative studies show that people who consult complementary practitioners usually have longstanding conditions for which conventional medicine has not provided a satisfactory solution, either because it is insufficiently effective or because it causes adverse effects. They have generally already consulted a conventional healthcare practitioner for the problem, and many continue to use the two systems concurrently. Some "pick and mix" between complementary and conventional care, claiming that there are certain problems for which their general practitioner has the best approach and others for which a complementary practitioner is more appropriate. Most find their complementary practitioners through personal recommendation.

Once complementary therapy is started, patients' ongoing use can be broadly classified into four categories—earnest seekers, stable users, eclectic users, and one-off users. Decisions about using complementary medicine are often complex and reflect different and overlapping concerns. It is too early to assess whether the increasing availability of complementary medicine on the NHS is changing either the types of people who use complementary medicine or their reasons for doing so.

Who uses complementary medicine?

Survey data give us some idea of the characteristics of complementary medicine users in the United Kingdom.

- About 55-65% of those who consult complementary practitioners are female, a similar proportion to users of conventional healthcare
- The highest users are those aged 35-60 (users of conventional healthcare services tend to be the very old and the very young)
- Children make up a relatively small proportion of users of complementary medicine, but individual therapies differ: nearly a third of the patients of some homoeopaths are aged under 14, whereas acupuncturists, herbalists, and chiropractors see comparatively few children
- Users of complementary medicine tend to be in higher socioeconomic groups and have higher levels of education than users of conventional care
- There has been little research into ethnicity and use of complementary medicine in Britain
- More people use complementary medicine in the south of England than in Wales, Scotland, and the north of England, but evidence suggests that this reflects access to and availability of complementary practitioners rather than any fundamental regional differences in public attitudes or interest.

Are users psychologically distinct?

Some surveys have found greater psychological morbidity, and more scepticism and negative experiences with conventional medicine, among users of complementary medicine compared with users of conventional medicine. These are not necessarily

Popularity of different complementary therapies among users in Europe

% of sample using each therapy

	Belgium	Denmark	France	Netherlands
Acupuncture	19	12	21	16
Homoeopathy	56	28	32	31
Manipulation	19	23	7	No data
Herbalism	31	No data	12	No data
Reflexology	No data	39	No data	No data

Data from Fisher 1994



Stereotypes about use of complementary medicine being associated with alternative lifestyles are not supported by the research evidence

Recognised patterns of use of complementary medicine*

Earnest seekers—Have an intractable health problem for which they try many different forms of treatment

Stable users—Either use one type of therapy for most of their healthcare problems or have one main problem for which they use a regular package of one or more complementary therapies

Edectic users—Choose and use different forms of therapy depending on individual problems and circumstances

One-off users—Discontinue complementary treatment after limited experimentation

*Modified from Sharma 1995



Child receiving cranial osteopathy

inherent differences and probably reflect the fact that most people who turn to complementary medicine do so for difficult, persisting problems that have not responded to conventional treatments.

Some heterogeneity between users of different therapies has been identified—for example, acupuncture patients tend to have the most chronic medical history and to be the least satisfied with their conventional treatment and general practitioner.

What conditions are treated?

Over three quarters of patients presenting to practitioners of the major complementary disciplines have a musculoskeletal problem as their main complaint. Neurological, psychological, and allergic disorders are also common. Others have problems that are not easy to categorise conventionally, such as lack of energy, and some have no specific problems but want to maintain a level of general "wellness." Case mix varies by therapy: for example, homoeopaths and herbalists tend to treat conditions such as eczema, menstrual problems, and headaches more often than musculoskeletal problems.

Complementary practitioners

The number and profile of complementary practitioners is changing rapidly. In 1981 about 13 500 registered practitioners were working in the United Kingdom. By 1997 this figure had trebled to about 40 000, with three disciplines—healing, aromatherapy, and reflexology—accounting for over half of all registered complementary practitioners, with roughly 14 000, 7000, and 5000 members respectively. Although membership of these disciplines is high compared with other complementary disciplines (only 1118 chiropractors and 2325 osteopaths were registered at the time), very few practise full time.

Nearly 4000 conventional healthcare professionals also practise complementary medicine and are members of their own register (such as the British Medical Acupuncture Society for doctors and dentists). Of these, nearly half practise acupuncture (mainly doctors and physiotherapists), about a quarter practise reflexology (mainly nurses and midwives), and about one in seven practises homoeopathy (mainly doctors, chiropodists, and podiatrists). Many more conventional healthcare professionals, especially general practitioners, have attended basic training courses and provide limited forms of complementary medicine without official registration.

Complementary medicine provided by the NHS

A substantial amount of complementary medicine is provided by conventional healthcare professionals within existing NHS services, and this provision seems to be increasing. In 1987 a regional survey of general practitioners revealed that 16% practised a complementary therapy. A UK-wide survey in 1995 showed that almost 40% of all general practices offered some form of access to complementary medicine for their NHS patients, of which over 70% was paid for by the NHS. Over half of these practices provided complementary medicine via a member of the primary healthcare team, usually a general practitioner. Another local survey published in 1998 suggests that in some areas up to half of general practices provide some access to complementary medicine.

Less is known about access via secondary care, but certain specialties are more likely to provide complementary therapies. In 1998 a survey of hospices revealed that over 90% offered some complementary therapy to patients. Pain clinics, oncology units, and rehabilitation wards also often provide complementary therapies.



Patients are more likely to turn to complementary medicine if they have chronic, relapsing and remitting conditions such as eczema



A fifth of all UK general practices provide some complementary medicine via a member of the primary healthcare team

Further reading

- Coward R. The whole truth. London: Faber and Faber, 1989
- Furnham A. Why do people choose and use complementary therapies? In: Ernst E, ed. Complementary medicine, an objective appraisal. Oxford: Butterworth Heinemann, 1998: 71-88
- Sharma U. Complementary medicine today: practitioners and patients.
 Rev ed. London: Routledge, 1995
- Research Council for Complementary Medicine. Public usage of complementary medicine: an overview. London: RCCM, 1998

Key references

- Mills S, Peacock W. Professional organisation of complementary and alternative medicine in the United Kingdom 1997: a report to the Department of Health. Exeter: Centre for Complementary Health Studies, University of Exeter, 1997
- Thomas K, Fall M, Nicholl J, Williams B. Methodological study to investigate the feasibility of conducting a population-based survey of the use of complementary health care. London: RCCM, 1993
- Thomas K, Fall M, Parry G, Nicholl J. National survey of access to complementary health care via general practice: report to Department of Health. Sheffield: SCHARR, 1995
- Fisher P, Ward A. Complementary medicine in Europe. BMJ 1994;309:107-11
- Wearn AM, Greenfield SM. Access to complementary medicine in general practice: survey in one UK health authority. JR Soc Med 1998:91:465-70

The picture of "New Agers" is reproduced with permission of Morvan/Rex Features/SIPA Press. The pictures of cranial osteopathy, eczema, and reflexology are reproduced with permission of BMJ/Ulrike Preuss.

The ABC of complementary medicine is edited and written by Catherine Zollman and Andrew Vickers. Catherine Zollman is a general practitioner in Bristol, and Andrew Vickers will shortly take up a post at Memorial Sloan-Kettering Cancer Center, New York. At the time of writing, both worked for the Research Council for Complementary Medicine, London. The series will be published as a book in spring 2000.

BMJ 1999;319:836-8