



The European Council for Classical Homeopathy

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Representing Homeopaths in Europe

Commissioner David Byrne
European Commission
Directorate-General Health and Consumer Protection
Rue de la Loi 200 / Wetstraat 200
B-1049 Bruxelles / Brussel – Belgium

14 October 2004

Re: Enabling Good Health for all - A reflection process for a new EU Health Strategy

Dear Mr Byrne

Thank you for launching this most valuable reflection exercise. It is most welcome.

Please find attached our submission in response to your consultation document. We hope it adds some short insights that will contribute to the overall reflection process.

EU citizens are increasing turning to CAM therapies and homeopathy in particular in seeking answers to the growing burden of chronic disease. Yet these approaches are not provided or funded by member states nor is research into CAM supported by the EU or member states.

Furthermore the perspective of CAM and its practitioners is not currently reflected in the constituency of the EU Health Policy Forum that you have established. My organisation is a member of the European Public Health Alliance (EPHA) and together with other CAM members of EPHA we are currently launching a European platform for CAM. We shall shortly be applying for a seat on the health policy forum and I sincerely hope that you will give serious consideration to allocating such a seat to us when you next review the Forum's membership

We very much look forward to reading the outcome of this exercise.

Yours sincerely

Stephen Gordon
ECCH General Secretary



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A Response to the Consultation Document: Enabling Good Health for All

from the European Council for Classical Homeopathy.

The ECCH represents the collective voice of the homeopathy profession in Europe. Its members are the professional associations of homeopaths from 22 European Countries.

Introduction

There is much in this paper that we can agree with, particularly the drive to have health become a central priority in all EU policy making. What follows is a series of comments on various titles and phrases that are used within the document with particular reference to the role and place of complementary and alternative medicine(CAM) in EU healthcare.

‘The time has come for a change of emphasis from treating ill-health to promoting good health’

The significant rise in the popularity of homeopathy and other forms of complementary and alternative medicines (CAM) in Europe is a direct reflection of the fact that Europe’s citizens perceive that the generally pervasive conventional medical approach to healthcare is limited in what it has to offer across the whole range of their healthcare needs. Conventional medicine primarily focuses on illness and its treatment. CAM offers both a system of treatment *and* prevention through its emphasis on restoring patients to health and improving patients’ health. Increasingly patients are specifically using CAM to improve their health and thereby avoid ill-health in the first-place and the long-term.

‘Good health still depends on where you live, what you do , how much you earn.’

Is CAM making a contribution to socio-economic health status differentials? The majority of CAM practice and delivery in the EU is currently provided in the private healthcare sector. CAM is therefore only easily accessed by those who can afford to pay for it. Its lack of provision by national health care services means that the poor, the socially excluded and minorities do not have equal access to its potential benefits.

‘When they fall ill Enabling citizens to make the right choices is indispensable’

Without a doubt conventional medicine is highly efficacious in a particular range of situations and medical conditions. But there is a wide range of conditions where it is of no help or limited help. It is for the treatment of many of these latter problems that European citizens are increasingly using homeopathy and other CAM approaches. The identification of areas of potential benefit and dissemination of that information should be an EU responsibility.

‘The health sector is driven by scientific and technological progress’

CAM approaches to healthcare should be viewed as innovative technologies and their research invested in appropriately.

In 1997 the European Parliament called on the Commission to
".... carry out a thorough study into the safety, effectiveness, area
of application and the complementary or alternative nature of all non-conventional
medicines

and on the Council

" ... after completion of the preliminary work referred to above to encourage the
development of research programmes in the field of non-conventional medicines
covering the individual and holistic approach, the preventive role and the specific
characteristics of the non-conventional medical disciplines;

(A4-0075/97 Resolution on the status of non-conventional medicines)

These calls have so far gone unanswered yet EU citizens continue to increase their uptake of CAM. EU member states reject CAM approaches on grounds of lack of evidence of efficacy yet refuse to invest in researching their efficacy. This catch-22 situation does not serve EU citizens in a manner appropriate to the extent of their expressed interest in and use of CAM.

Research into CAM should be included as part of a thrust to 'mainstream health into Research Policy and the RTD Framework Programme'. The National Institutes of Health in the USA has invested millions in CAM research in response to US citizens large uptake of CAM.

'Improving the cost efficiency of health care systems through exchange of good practice'

CAM therapies are extremely cost- effective and don't require the millions of prior investment that are customarily put into conventional medical research. The material costs of CAM interventions are also low with their medicines and other technology costs being extremely low when compared to conventional approaches. The main cost is the cost of the consultation times that are usually longer than those given in conventional care. Yet therapies such as homeopathy provide what many patients complain is missing from modern medical care – time to be heard, their condition understood and treatment given that restores them to health rather than leaves them dependent on conventional drugs for the rest of their days. When weighed up the costs of CAM care are no more and potentially far less than conventional care - not least when the long term preventive benefits of such interventions are taken into account.

'The EU must listen carefully to the voice of the health community'

While the EU may claim to be committed to bringing together all health players and building partnerships those claims do not as yet include CAM. The EU Health Policy Forum does not include any representative voice of the large and growing community of CAM professionals who practise in Europe – particularly those who do not have conventional medical background – of which there are a growing number. As such it is unrepresentative of the broad cross-section of the health community and in particular the citizens who use CAM. As a result a more a patient-centred, holistic view of patient care is missing from the discussions. We would sincerely request that the Commission review the membership of the Health Policy Forum and ensure that in the near future these interests are appropriately represented.

ECCH is a long-standing member of the European Public Health Alliance (EPHA) and is currently involved in establishing an EU Platform to represent CAM.

ECCH

14 October 2004

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