

## **Integrated Healthcare: A Way Forward?**

### **HRH The Prince of Wales**

In recent years there has been an enormous growth in the use of complementary medicine - not only in Britain, but also in other European countries, the United States and other parts of the world. More and more people are turning to homoeopathy, herbal medicine, acupuncture, osteopathy and a wide range of other treatments - mainly paid for out of their own pockets. In Australia, for example, a recent study estimated that people spend twice as much on complementary medicine as they do on orthodox pharmaceuticals. I believe that this trend reflects a growing concern with the use of more and more powerful drugs and a potentially rather impersonal approach to healthcare. There is a feeling - not only among patients, but among GPs, nurses and other mainstream health practitioners too, that there needs to be greater integration and interprofessional collaboration in patient care and that we can each, as individuals, play a greater role in contributing towards our own health and well-being. Health should be much more than the mere absence of disease or infirmity; and we should strive to ensure that everybody can fulfil the full potential and expression of their lives.

This is not to deny the value of the dramatic scientific discoveries, for example in molecular biology, that have enabled Western medicine to make leaps in our understanding of the disease process and how to treat it. Serious illnesses and injuries that were once regarded as untreatable can now be cured and new forms of treatment are being developed all the time. I am confident that this trend will continue, supported by the dedication of researchers and medical practitioners and the generosity of private individuals, in addition to substantial spending by governments around the world. It is vital to human progress that it should. Yet we know that new medical treatments and procedures can be costly to develop, and sometimes costly in application. As medicine becomes more sophisticated and more ambitious, so the costs have tended to rise.

Against this background, it hardly needs saying that we should try to make best use of all our available resources. That is where complementary medicine could have an important - indeed, vital role to play, in supporting and complementing current orthodox medical practice. Often it seems that complementary medicine can bring a different perspective and fulfil a real human need for a more personal touch which, in turn can help unlock the individual's inner resources to aid the healing process. The goal we must work towards is an integrated healthcare system in which all the knowledge, experience and wisdom accumulated in different ways, at different times and in different cultures is effectively deployed to prevent or alleviate human suffering. There is much that all the various traditions of medicine can learn from one another.

Over the last two decades I have supported efforts to focus healthcare on the particular needs of the individual patient, employing the best and most appropriate forms of treatment from both orthodox and complementary medicine in a more integrated way. I have been greatly encouraged to see the progress which has been made in increasing the range of choice available to the individual and to the medical practitioner. These changes in attitude were reflected in the BMA's report *Complementary Medicine: New Approaches to Good Practice*, published in 1993 and a report by the General Medical Council *Tomorrow's Doctors* in the same year. Some complementary treatments are now available within the National Health Service; and an independent Survey for the Department of Health in 1995

showed that almost forty per cent of GP partnerships in England provide access to complementary medicine for NHS patients, either by undertaking these treatments themselves or by delegating them to complementary practitioners. Acupuncture, homoeopathy and osteopathy were most frequently used.

There has been progress in education and in standard-setting too. There has been an increase in the number of accredited university courses for students wishing to study for a career in a number of different complementary medical professions. Two of these - osteopathy and chiropractic - have recently become regulated by Act of Parliament and some of the other professions are working hard to establish credible and effective systems of professional self-regulation.

But there is still a great deal to do. Last year I asked a group of leading individuals from different scientific, educational and healthcare backgrounds for their advice on how we could make further progress. We quickly identified four priority areas:

- scientific research into the safety and effectiveness of complementary medical therapies, how they work, how they could be improved and where they are most likely to be helpful;
- the development of formal standards and systems of professional regulation, to provide effective safeguards for the public;
- improved education and communication, to promote a sharing of ideas and the basic skills and principles of professional conduct essential for all healthcare practitioners, to improve the quality of care;
- effective delivery mechanisms to provide integrated healthcare to the public.

Accordingly, we established four Working Groups to consider each of these priorities, and produced a draft report which was circulated for comment to a large number of individuals and organizations with an interest in orthodox and complementary healthcare. These included royal colleges, leading researchers, medical schools, consumers of healthcare and bodies representing practitioners of complementary medicine.

The results of 18 months' discussion and consultation were published in 1997 in a new report entitled *Integrated Healthcare - A Way Forward For the Next Five Years?*. I pay tribute, in particular, to the dedication and commitment of those who chaired and participated in the Working Groups. I believe they have advanced the cause of integrated healthcare and shown the way forward for further co-operation and partnership.

The report makes twenty-eight specific proposals for further consideration and development. It suggests ways of introducing effective systems of self-regulation for complementary medical professions and therapies to protect the public. It explains how research into the safety and effectiveness of complementary medicine might be organized and funded. It proposes developments in education and training for both orthodox and complementary practitioners, draws attention to good practice in the delivery of integrated healthcare and suggests a wider and more detailed survey to form the basis of future guidance on best practice.

But the report is not a definitive blueprint for action. Its purpose is to stimulate a wider public and professional debate about the possible role of complementary medicine within

the changing pattern of healthcare in this country, and how the various initiatives suggested in the report can be brought about.

For me, the most heartening finding of the work so far has been the very wide measure of agreement between orthodox and complementary practitioners on the need for this initiative to succeed. It seems to me that we have reached a defining moment in our attitude towards healthcare in this country. I believe that we have a unique opportunity to take stock and consider how we can make the very best use of all our precious healthcare resources. We cannot afford to overlook or waste any knowledge, experience or wisdom from different traditions that could be brought to bear in the cause of helping those who suffer. We must respond to what the public are clearly showing they want by placing more emphasis on prevention, healthy lifestyles and patient-centred care. Integrated healthcare is an achievable goal. It is one we cannot afford to miss.

*This article first appeared in the Daily Telegraph*