

Bill

HEALTH AND SCIENCE

Alternative practitioners urged to regulate themselves

BY AILEEN O'TOOLE

Willie O'Dea, the Minister of State at the Department of Health, has called on practitioners of alternative medicine to introduce a system of self-regulation. The Irish Medical Organisation (IMO) believes that this would not go far enough to protect the public and wants the state to become involved in the regulation process. There are divergent views within the alternative medical field about the need for regulation.

O'Dea calls alternative or complementary medicine as the growth area of the 1990s but not the 1980s. He said the main difficulties is that anybody can set themselves up as a reflexologist or a chiropractor. A lot of people within alternative medicine want some form of regulation, he said.

He added that there has been

some "anecdotal" evidence of problems with alternative practitioners but he said that his call for self-regulation was not linked to these problems. In the UK, he said, osteopaths had recently introduced a system of self-regulation which could easily be replicated here.

O'Dea believes that the Department of Health has neither the expertise nor the resources to become involved in regulation. There have been some suggestions in the European Parliament about regulation and he suggests self-regulation should be the first step in the process.

Dr Henry Finnegan, vice-president of the IMO, said that doctors are not opposed to alternative methods and realise that they can help patients. However, there is a huge gulf in the way the conventional and alternative medical fields operate, he said.

In conventional medicine, there is a specified training programme, recognised qualification, and an independent body, the Irish Medical Council, which registers doctors and ensures that they are qualified and competent. Doctors are not allowed to advertise their services, and are obliged to hold indemnity insurance in the interest of the public.

"If you look at the other side, a practitioner in alternative medi-



doctors may not have to train. Some of the qualifications may be of value but some may be of questionable value. There is no register available and practitioners are allowed to advertise and there is no requirement to take out indemnity cover.

Finnegan challenges the contention from alternative medical practitioners that their treatments can do patients little harm. "That may be true for homeopathy where the solutions are diluted to such a high degree that they could not cause any harm, but problems can arise with manipulative therapies," he said. "Manipulation can be carried out without the use of X-rays and could do more harm than good"

"We find that for many people



Dr Henry Finnegan (left) and Willie O'Dea

who go to alternative practitioners the claims that they make do not materialise," he continued, adding that many medical card holders and others who cannot afford these treatments spend a lot of money "before they realise that it's hocus pocus".

Finnegan contends that the state should act "in the public interest" and become involved in regulating the availability of treatments.

"The public should know what they are getting themselves into - the public has a double-think. They expect the conventional medical practitioner to be on the medical register, to be competent to practise and to have indemnity

cover. But the same patient will go down the road to an alternative practitioner and have no regard for such things."

Alternative medicine is fragmented. Some organisations do imposed standards, some do not, and many practitioners do not belong to any association. Opinions are divided about whether regulation is necessary and what form it should take.

Tralee-based acupuncturist Tony McGarry is a member of the Association of Irish Acupuncturists, which obliges its members to abide by a code of ethics and has several basic standards beginning with three years training in a recognised college.

He believes that "nearly everyone" has insurance and that insurers impose certain basic standards before agreeing to extend cover.

While there is no "across the board regulation" of alternative medicine, individual groups do operate their own standards. In his opinion, the sector needs the state to be involved in regulation but he admits that there would be resistance to this. "There will always be a few wild cards in the pack," he says.

A Dublin spiritual healer, who should not be named, said that he takes his omissions "from the spirit and not from Willie O'Dea".

He said that the sector is too broad to lend itself to universal regulation and that individual groups of practitioners do abide by certain codes. "Regulation is a quagmire and the politicians are being pushed by the medical profession." He disputes that the public may be put at risk by non-regulation and said that the majority of treatments are "non invasive".

Jim Lucey, who specialises in chiropractic and massage therapy, said that regulation "would require rules that would be so broad that they would no longer be rules". Some areas of alternative medicine, such as acupuncture and traditional Chinese medicine, have their own codes of practice.

He believes that patients would find out "immediately" if a practitioner was of no use. In spite of the growth of alternative medicine, Lucey contends that the IMO gains are not great. "I'd make more money digging the roads or selling hot dogs. I'd like to do with lifestyle than with medicine."

Martin Fonck, president of the Irish Health Culture Association, says that his organisation already represents members.

He adds that the association represents 300 people involved in various holistic treatments "that certain benchmarks are for members."

They must have professional insurance, are subjected to an annual inspection and a number of approved courses.

"We do not see ourselves as a separate mould. We see ourselves as holistic," he adds. There have been examples where members work very closely with conventional practitioners. He cites the example of a practitioner who used hypnosis technique in an operating theatre in a hospital.

He believes that there is a need for greater self-regulation so that practitioners must be subjected to independent inspection, have minimum insurance cover, and have recognised qualifications.