Alternative practitioners urged to t;,2gH$f seif,-re ruia, igp

Dr Henry Finnegan (left) and Willie O'Dea

He believes that "nearly everyone" has insurance and that insurers impose certain basic limits before agreeing to attend.

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

A Dublin sptitual healer, who asked not to be named, said that he takes his clients "out of the system" and becomes involved in regulation and said that the majority of them are "involved in the public interest" and become involved in regulating the 'alternative' mould. We see some of the most difficult cases of all patients coming in, "it's hard to know what they are going through in the public."

The public should know that they are getting themselves into the public has a double-think. They expect the conventional medical practitioners to be on the medical register but they could do more harm than good. "We find that for many people, some "anecdotal" evidence of problems with alternative practitioners but that it is not a big problem. 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 "Involvement of Health" is not far enough to protect the public and states the need for 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 gap in the way the conventional and alternative medical fields operate, he said.

In conventional medicine, there is a specific training program, recognised qualifications, 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 medicine 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 insurance." 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, some "anecdotal" evidence of problems with alternative practitioners but that it is not a big problem. 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.

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