

Ignore growing patient interest in alternative medicine at your peril, MDs warned

Heather Kent

In brief

CANADA NOW HAS AN INSTITUTE to study alternative medicine and seek evidence concerning it. The founder, endocrinologist Wah Jun Tze, says most physicians appreciate that the institute will seek to find evidence for unproven therapies. It recently named a research director, and expects to have protocols for randomized, controlled studies in place by the new year. Herbal remedies are one likely candidate for study.

En bref

LE CANADA S'EST MAINTENANT DOTÉ D'UN INSTITUT D'ÉTUDE de la médecine parallèle et de recherche de données probantes en la matière. L'institut essayera d'obtenir des données probantes sur des thérapies non démontrées et selon le fondateur, l'endocrinologue Wah Jun Tze, la plupart des médecins apprécient cette recherche. Un directeur de la recherche a été nommé récemment et les protocoles d'études aléatoires contrôlées devraient être déterminés avant le début de la nouvelle année. Les remèdes à base de plantes médicinales seront probablement à l'étude.

Sandwiched between the jumble of structures on the busy 12th Avenue site of the Vancouver Hospital sits a Canadian medical anomaly — the Tzu Chi Institute, the country's first centre for evaluating alternative and complementary therapies. The goal of the institute, which opened in October 1996, is to research and select the most useful alternative treatments and eventually integrate them into conventional treatment programs. The institute says alternative therapies are those lacking scientific validation that are excluded from medical school training programs and uninsured by health plans.

Its driving force is Dr. Wah Jun Tze, an internationally recognized pediatric endocrinologist and Order of Canada recipient. He was motivated by a "tremendous public interest" in alternative medicine, particularly in BC's rapidly growing Lower Mainland. A recent Angus Reid poll commissioned by Tze found that 89% of respondents said that they would use a facility such as the new institute.

Tze, who says "physicians cannot afford to ignore this level of interest," adds that most doctors he has talked to "welcome more information" on alternative therapies. He thinks most physicians "appreciate that the institute is looking very carefully into promising approaches," based on scientific studies.

Tze obtained an endowment of \$6 million over 5 years from the Tzu Chi Foundation, an international Buddhist charitable organization. The Vancouver Hospital board responded enthusiastically to the idea, supplying services and vacant buildings, which were extensively renovated with funds advanced from the endowment.

Interest earned from the endowment covers operating costs, but does not include compensation for therapists who will be contracted to conduct research. To cover these costs various options, including charging patients, are currently being explored.

Additional funding of \$300 000 annually is being contributed by the institute's partners, such as the University of British Columbia and the BC Women's Hospital and Health Centre, and the Vancouver Hospital Foundation will donate \$100 000 annually. The institute is also seeking private donations through sponsorships for equipment and other items, and there are plans to establish a foundation.



Features

Chroniques

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Dr. Wah Jun Tze: a new centre to respond to new attitudes



Partly because funding and staffing issues are still being resolved, the institute is not yet admitting patients. However, Dr. Allan Best, a psychologist, was recently named research director and chief executive officer at the institute, and prospective patients are being identified. They must complete a community needs-assessment questionnaire, which attempts to gauge their motivation for seeking care and to identify trends. By last March almost 400 completed questionnaires were being analysed by institute staff, and by this fall between 500 and 600 people had been identified as potential patients and research subjects.

Gina Dingwall, the institute's director of education and patient services, says most people seeking help from it have chronic conditions and want someone to manage their treatment — they are seeking symptomatic treatment rather than a cure. They also want assurance of the safety of alternative therapies. In questionnaires completed so far, most respondents have concerns relating to fibromyalgia, irritable bowel syndrome or various types of cancer.

The centre is not aiming to target BC's large Asian population. Dingwall says that many recent Asian immigrants tend to continue using traditional practitioners, as they did before coming to Canada. Although ethnicity is not identified in the survey, Dingwall estimates that 10% to 15% of respondents are of Asian descent.

Dingwall says completed questionnaires have pointed to "a huge disgruntlement" with the relationship many respondents have with their physicians. Some patients stated that their doctors offer only drugs and surgery and have no background in alternative therapies, while others say that their doctors will no longer see them if they undergo alternative care.

Dingwall asserts that some doctors "suffer from an intolerance and disinterest" in chronic conditions. This, combined with a lack of "legitimized" medical school training in alternative care, results in a "mutual paranoia" between alternative practitioners and many conventional physicians. However, she hopes that a "complementary relationship" eventually develops with doctors. "We are here to facilitate change and see where their challenges are," she says.

Dingwall and her colleagues are developing an assessment tool to evaluate symptoms cited by survey respondents. They will then assign patients to pilot research projects designed to evaluate the efficacy of alternative treatments. Initially, about 6 projects are planned, and therapies selected may range from therapeutic touch to herbal remedies. Following the pilot studies, research will be carried out on a larger scale for therapies that offer the most promise. The treatments eventually offered by the institute will therefore be based upon positive research outcomes.

The pilot studies will be conducted by certified practitioners working under Allan Best's supervision. They will be selected from therapists, ranging from homeopaths to

biofeedback therapists, who have approached the institute.

Among the practitioners, who meet regularly with the institute, are some physicians who operate "integrated" or "complementary" practices that may include naturopathy, nutrition medicine, herbal medicine or mind/body medicine. Dr. Nancy Wardle, a Vancouver physician and psychotherapist, says "this is a very exciting time for integrative opportunities for other forms of healing." However, she acknowledges that a chasm yawns between many conventional physicians and alternative practitioners. "There is always going to be a perception that there are 2 different worlds," she says. However, Wardle considers the establishment of the Tzu Chi Institute "a very positive step" that will take considerable time, likely "a couple of generations," to be fully accepted by physicians.

Dingwall confirms that the institute has received a mixed response. On one hand, doctors from the Vancouver Hospital's gerontology and burns units have recently asked her for help with new approaches to care. On the other, some physicians have expressed concern to her. Some are being made uncomfortable by fundamental changes in the physician-patient relationship, which is leading to more autonomous patients becoming consumers of health care and selecting from an array of treatment choices.

Wardle says some physicians tell her that their role is being changed so much they are being forced to do work they were not trained for. Other doctors fear that initiatives like the institute may replace science with "pseudoscience."

However, Dr. Derryck Smith, past president of the British Columbia Medical Association (BCMA), says his association is "most pleased that the institute is based on bona fide research. We can all tell science from pseudoscience through the ways that research is dealt with during the peer-review process." A representative from the BCMA sits on the institute's continuing education committee and has been invited to join other committees.

Dr. Tom Handley, registrar at the College of Physicians and Surgeons of BC, notes that "medicine has been full of alternatives since time began, and the college is prepared to endorse the institute if it is truly a positive step towards truths and clarifying various methods of practice."

The college expects that practitioners providing therapy at the institute will have had their credentials appraised. It is represented on the credentials committee.

Wardle, who says her 3-year-old practice in Vancouver has been well accepted by colleagues, is optimistic about the institute's future. "I am truly hopeful that within the medical community there would at least be the [emergence] of curiosity," she says.

For his part, Tze recognizes that it will take time for the institute to achieve its objectives, but he hopes it will "move forward" quickly. ?