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**RADIO SCIENCE UNIT**

**THE OTHER MEDICINE 1.**

**RADIO 4**

**TUESDAY                      21/09/04              2100-2130**

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**NOT CHECKED AS BROADCAST**

## **MUSIC**

### **ACTUALITY - SHIATSU CLASS**

Try and imagine just having all your favourite hills and ...

### **FORD**

At the Shiatsu college in North London Kim Lovelace takes his second year pupils through a warm up exercise before they start body work practice...

## **ACTUALITY**

### **FORD**

From weekend initiation courses to three-year degrees, thousands of people are signing up for courses in CAM - Complementary and Alternative Medicine. Universities alone account for 10,000 students of CAM. The choice is vast, with over 200 therapies practised in Britain today.

### **STUDENT**

I had received Shiatsu for at least 10 years and have found it very helpful for my own health and wellbeing and I wanted to be able to use those techniques to work with other people. So it connected very strongly to doing a Shiatsu course.

### **FORD**

One in four of us regularly use some form of complementary therapy every year, collectively spending well over a billion pounds. In this series, we'll explore the personal experiences, the scientific evidence and the sometimes quite bitter power struggles at the heart of the complementary medicine boom. We ask why so many of us are attracted to complementary therapies, how they can affect our health and wellbeing and whether in the future this 'other medicine' will become fully integrated into NHS care.

## **MONTAGE**

CAM really is a patient revolution. Basically people are telling us that they're benefiting from CAM.

I've no problems with alternative practitioners provided they don't think they are God.

People like the individual approach, they like being treated holistically as a person, rather than being seen as a disease.

Complementary medicines just feed in to the continuation of the materialist life - I think it's selfish indulgence frankly.

Well I just knew that it's thousands of years old and that it can't have gone on for 5,000 years or so and it be nonsense.

It's like Harry Potter - it's magic.

Patients have probably an incipient dislike of conventional medicine, and I think people find going to a doctor a non-satisfying experience.

**FORD**

My exploration of the CAM phenomena started with Hebden Bridge in Yorkshire which has become a honey-pot for alternative new-age life-styles and more recently of many complementary treatments. It began attracting like-minded liberal thinkers in the early '70s, some of whom set up communes on the moors, then bought up dirt cheap property. It's new-age appeal grew and now it sparkles with new life and dozens of cafés, health food stores and alternative practitioners of every kind.

**ACTUALITY - JULIA FARRANTS AND PATIENT**

[Knocking]

Come in.

Hi.

Hi Mabe, come and take a seat.

Thank you.

So how have you been doing this week?

Oh pretty good in general, yeah. I've been quite busy, so I'm getting a little bit tired. But generally I'm doing really well, I think I just need a bit of maintenance to keep me going.

Yes good. You're still managing to do everything that you've got to do - still managing to stay in work?

Oh absolutely, I'm really enjoying my job and I'm able to do other stuff as well. But you know me, I tend to push the boundaries a little bit, so ...

Yes, have you got any symptoms this week, any sore throat, swollen glands?

A little bit, a little bit of sore throat when I wake up in the morning maybe but no swollen glands this week, no.

**FORD**

Mabe has come to see her 'doctor' - Julia Farrants - she's got ME. This sounds like a normal GP appointment, but Julia is not GP anymore, she grew tired of what she felt she could offer her patients in general practice so gave it up to retrain as an acupuncturist.

**ACTUALITY - JULIA FARRANTS WITH PATIENT**

Okay, can you stick your tongue out please?

Sure.

Okay, so it's quite red at the tip, so that'll tell me you've got a lot of emotional issues going on at the moment and once more - it's looking much better than it was though.

The tongue body is nice and thick, the coating is not too thick, the cracks are in the right place, so that's quite - you're doing quite well.

#### **FARRANTS**

The places where the needles are put are known as acupuncture points and these are centres of energy in the body that connect quite directly to different organs and different systems in the body. So by putting a needle in that point we can affect the internal energy and the internal organs.

#### **FORD**

What do people come to you for?

#### **FARRANTS**

People come for treatment with different conditions. I've done a little audit of the people who came to me in the last year in Hebden Bridge. Eleven per cent came with back pain, seven per cent came with ME or chronic fatigue, six per cent hepatitis C - there's a whole list of other things - joint problems, emotional problems, insomnia, infertility, eating problems, tennis elbow, help with treatment around cancer, pregnancy and IBS.

#### **FORD**

Why did you go into acupuncture because you were a medical student weren't you?

#### **FARRANTS**

I felt that I wanted to offer a more holistic approach, I wanted to be able to have the time to offer people - I found my personal experience of Western medical training that it was rather dehumanising for myself and for the patients.

#### **MABE**

I think what I was missing from my GP when they could no longer help me with my illness was that the therapeutic relationship between a physician and their client and you get that with acupuncture - you get that therapeutic relationship. And you also get it with more time attached to it and I think GPs are often so pushed for time, through no fault of their own, that you can feel terribly rushed and you may go in with a sore throat but actually you also might have other things to tell them too but once the first thing is addressed you do somehow feel that's it, your time's over, go now, whereas when you're seeing someone and let's be honest about it when you're paying them for their time you feel a lot more empowered to say well okay I've got a sore throat but also this is going on for me and that is going on for me and can you treat me for the whole lot please. And that's what you get.

#### **FORD**

What patients like Mabe seem to appreciate most about their treatment is what's often called a holistic approach. Taken from the Greek holos, meaning whole or complete, it's about seeing and treating the patient as a whole person, rather than just a set of symptoms - an accusation often levelled at orthodox medicine. Diane Seymour is a Homeopath in Hebden Bridge and specialises in treating children. She explains just how crucial the concept of holism is to CAM and in particular, homeopathy.

**SEYMOUR**

Taking a full holistic case is not an ideal, it's absolutely a practical necessity based on the basic principles of homeopathy. If you don't take a full case which will cover psychological, physical and in the case of children developmental things - it could be learning difficulties, a whole range of things - you will not have a proper case. And the remedy, which is the homeopathic medicine you give, will not be accurate. So we don't have any choice - we have to give our patients a considerable amount of time, a lot of focus, go into it in great detail and listen very, very carefully, observe very, very carefully.

**FORD**

So if I were a patient coming to you what sort of questions would you ask me in the first interview?

**SEYMOUR**

In the first interview I'd be asking what you're particularly concerned with right now and take a lot of details around that. Then I would open it out into a wider picture of your general health. And then into areas which I think a lot of people find very unusual in going to seek help in healing which is you ask questions which are getting to know people as a whole - we don't treat conditions or particular illnesses or particular psychological problems, we treat whole people. It can be very helpful for the homeopath and it can be a good indication of the right remedy to find out things like, for example, what kind of weather people find particularly unpleasant or pleasant can give you an indication. So that we ask a lot - we ask about appetite, how warm and cold they are, how they sleep and even if they're not problems they can still provide us with very useful information.

**FORD**

Diane, how would you say that attitudes to homeopathy have changed over say the last decade?

**SEYMOUR**

I think people know more - I seem to have to give less explanations. And people come with assumptions to a certain degree about how homeopathy works and their expectations match what we can do better, which is a great relief I think. Because I welcome sceptics, I think it's a good thing, I think people should be sceptical about anything that they're spending time and money on and also involves their health and their happiness - they should be sceptical. On the other hand I have a dread of people who are zealously enthusiastic about homeopathy and I think that can lead them to have inappropriate expectations - we're not in the business of magic bullets here at all.

**FORD**

In later programmes, we'll explore the real value of the therapeutic relationship which is currently being subjected to scientific trials. We'll also look at homeopathy in more detail, as well as the other members of the so-called "big five" - osteopathy, acupuncture, chiropractic and herbal medicine.

But in Hebden Bridge, all manner of therapies are available, some at the less scientifically plausible though no less popular end of the scale. I went to the Hope Centre - where as well as Yoga classes and reflexology, it offers clients crystal

healing. Patients sit in a circle of crystals, laid round them on the floor. The crystals are chosen specifically to deal with their condition and vary according to their ailment. One of the healers is Anna Rewilak.

**REWILAK**

That's my doctor's bag - I have everything in here.

**FORD**

And your other life tucked away in a cupboard is it?

**REWILAK**

It's such a [indistinct words] I do offer medical holistic medical consultations also. Kainite. I mean these are not - they're changed weekly - they're not - the same pattern doesn't last every week.

**FORD**

But the crystals keep their efficacy do they?

**REWILAK**

Indeed.

**FORD**

For ever and ever?

**REWILAK**

Ever and ever if they're looked after.

**FORD**

What do you do to look after them?

**REWILAK**

Well as you can see these are stored, they're actually stored in a crystal circuit, you have to cleanse them and there are many ways to cleanse, many, many ways to cleanse - water overnight once a week is actually the simplest way. You can become very ritualistic about it but we try here simple, simple, simple, simple, simple because I want people to do it, we want people to make a change in their lives which is what we're talking about here - aligning your energy, aligning your energy to your body, to your heart, to your spirit because in essence that is what true healing is - it's alignment. Five minutes is all I require but for children, I mean they need to get them in because crystals act instantaneously. So I have a young girl that I see on a Saturday morning who's very, very hyperactive, she cannot sit still, focuses on the carpet perhaps or on the lights but won't sit still. I have to just get her in it and then the rest of the five minutes is just a consolidate what's gone on - because it's the flush, it's a charge and a flush.

**FORD**

Now just tell me a bit about yourself Anna, because you used to be a GP in general practice, there's a very big change to treating people with crystals in this sort of alternative centre, what made you change, what happened?

**REWILAK**

May I answer that indirectly because you'll see I could do so much in general practice and in general medicine but I was thwarted by circumstance and by the rules - you join a team you've got to play by the rules, you can stretch them a little but in essence if I wanted to achieve what I wanted to follow my dream it's actually to make people better fully, not just their body, not just their mind but their inner self, their spiritual essence.

**FORD**

Whilst many medical doctors like Anna are retraining in other forms of therapy, the vast majority of the 40,000 or more CAM therapists in the United Kingdom are lay-practitioners. And while I am yet to be convinced of the healing power of crystals, I found it hard to deny the sincerity of one mother I met who'd been at the end of her tether. She truly believes that her son was helped to overcome his lifelong behavioural problems with crystals.

**MOTHER**

The schools failed him as far as I was concerned. The doctors failed him because unless they've got like a specific illness or something it's just on that borderline where nobody can help him, if you like, there's just not enough out there for mothers like me and help. So the crystal healing that was the answer. James came for reflexology and then Anna did the crystal healing on him. And that seems to have opened him out - whole new world to him. He started being able to go on buses himself. He's actually got a girlfriend now and his communication skills are developing all the time, nearly every week he's coming home with awards of things he's done - he's doing joinery.

**FORD**

Were you at all sceptical at first when somebody said crystal healing could help?

**MOTHER**

Yes, naturally, you know I mean you think what can crystals do? But I mean I've actually experienced it myself - Anna's let me sit in the ring and you can actually feel the energy from it.

**MORRISON**

I think people have an amazing faith in the power of something they don't understand.

**FORD**

Sceptics aren't far behind the faithful here in Hebden Bridge, like local writer John Morrison whom I met in his local pub.

**MORRISON**

Some will say they have a special kind of energy, a special kind of healing power, something we don't understand is often more powerful than going and sitting in a doctor's waiting room. People are willing for miracles.

**FORD**

So are you saying there maybe a possibility that these practitioners who don't have much training and aren't regulated might actually be doing something useful?

**MORRISON**

I think listening to people is useful and if a doctor has only got five minutes to stare at his computer screen and tell people to take more medication then someone who will sit and listen empathetically to someone who thinks they've got a problem might actually solve that problem, yeah.

**FORD**

But you are quite sceptical about these alternative complementary practitioners aren't you?

**MORRISON**

I'm sceptical of a lot of things that claim to do things that are unproved but I'm no different to anybody else - if a doctor told me I had a problem that he or she couldn't cure, couldn't deal with, then I'd be like anybody else, I would be clutching at straws but I think that's what it is a lot of time - it's clutching at straws. And doctors don't seem quite as god-like anymore, especially round here where as you know Harold Shipman practised just down the road here, so our faith in doctors has probably taken a bit of a knock these last few years, yeah.

**FORD**

A product of its time, Hebden Bridge offers visitors a cosy retreat into the counter-culture revolution of the 1960s. And that's what's driven the CAM movement ever since, says historian Professor Roger Cooter of the Wellcome Trust Centre for the History of Medicine at University College London.

**COOTER**

There's always two elements to it, which is partly I don't like your authoritarianism in this surgery, telling me about some particle of my body gone wrong, I do want to take some control of it, know more about it, be empowered by knowledge and to varying degrees I think a kind of anti-science, anti-materialist approach, which has been there right through from the 19th Century.

**FORD**

Given that advances in orthodox medicine during the 20th Century were quite phenomenal, I mean let's just start at penicillin, then why should we also at the same time have this growth in an interest in things away from scientific medicine?

**COOTER**

Well it has a lot I think to do with political economy and the cost of medicine but really the critique of monopoly power in medicine built up that power during that golden age from penicillin to thalidomide or from insulin to thalidomide, when it comes down with a bit of a crash. So in the '60s there were a number of scandals of medical ethics, of testing cancer on geriatric patients without their consent, the huge expense of cost of treating people and the arrogance of a profession that was so highly invasive, so highly technologised that all patients were totally alienated. So it isn't as if the triumphs, which many people wouldn't deny, of scientific medicine caused it, it was part of a much broader cultural movement against that kind of monopoly, that kind of authority which could be increasingly found within an atmosphere where you wanted to bring down those with too much power.

**PATIENT**

Well I know that antibiotics don't work, that it suppress symptoms, but for deeper problems that the West medicine doesn't have a cure for there are other methods of treating. So particularly something like a back ache, there's not very much in the West - Western medicine other than some sort of painkillers that will help someone, whereas there are a lot of things that one can do for oneself or through an alternative practice that will heal the problem.

**PATIENT**

I was recovering from a slipped disc and he was introduced to me as a back specialist and he helped me a great deal. And then it developed from there and I was at the time travelling a lot and getting very run down and I think for me that's the great learning from him is firstly that everything is connected, where you think you have a pain it's actually originating from somewhere else. And secondly, most things you can do something about and you can help yourself before you get ill.

**LEWITH**

I think there's certainly a pull factor away from orthodox medicine and the perceived lack of sympathy in orthodox medicine towards CAM. But most of CAM use is a push factor.

**FORD**

George Lewith practises acupuncture, herbalism and homeopathy in Southampton, where he's also a CAM researcher. He believes CAM offers something positive that patients really want from their healthcare system and increasingly feel they can't get elsewhere. And he says they may continue to use CAMS even though their symptoms are not always improved.

**LEWITH**

CAM has something to offer them and when they receive CAM, even though it may be directed, acupuncture may be directed at a painful knee or a painful hip, and their pain doesn't seem to improve they still want to go on having acupuncture because it somehow improves their general wellbeing, it makes their problem easy to bear, it's something they will even pay for, although when we actually measure out CAM in terms of pain it doesn't necessarily seem to be helping their pain. So there's something there, it's about their quality of life, their feeling of wellbeing, perhaps a sense of coherence but the behaviour is very clear - people will go on having CAM and seek CAM but off their own volition, without any coercion because it offers them something that conventional medicine doesn't.

**FORD**

Michael Baum is a cancer specialist and emeritus professor of surgery at University College London. Over 30 years he's seen how desperate some of his patients are for reassurance, often turning to complementary and alternative approaches.

**BAUM**

As a good doctor we teach our students to recognise the need of patients for spiritual solace. The patient may be aware of this aching hole, facing death, not believing in God or not being a member of a religious community and then they'll be sucked in to these new-age belief systems which are really a replacement for spiritual solace and

spiritual support. So they will learn that somewhere, it's usually a long way away in some exotic place, there is a miracle cure. And so they will go seeking the miracle cure. I have enormous sympathy for these individuals but I have no sympathy at all for these charlatans who offer miracle cures.

#### **FORD**

So far we've heard some of the charges levelled against orthodox medicine, but do those criticisms hold up and is medicine in the orthodox field changing?

#### **GOLDACRE**

My name's Dr Ben Goldacre, I'm a doctor working in a hospital and I write a column called *Bad Science* for the Guardian about pseudo science in all forms of life, but particularly alternative therapies and the cosmetics industry. What I find slightly odd about alternative medicine is the way that it often involves going on the attack on mainstream medicines, so they'll say mainstream medicine is paternalistic or it's controlling, it's all about drugs, it's about treating symptoms and not underlying causes, which is obviously completely fallacious. An alternative therapist will give you something for pain and a mainstream doctor will give you something that will treat the underlying cause. As a young doctor I often go out of my way to try and involve the patient in the treatment decisions that are being made but sometimes you'll say to them this is what the diagnosis might be, these are the treatments that we could offer you, what do you think is best? And they look at you blankly and amazed, as if to say well you're the doctor, you make the decision. And I think one of the difficult things is that as the face of medicine changes it's very difficult to choose how to be with patients.

#### **PATIENT**

I was really lucky actually because I happened to have a consultant who was very open-minded, not blinkered like a lot of them are. I told him I was having acupuncture, I thought it was only right that I should, thinking he would poo poo it or you know... and his reaction was - Oh great. I also had a bad back at the initial stages of pregnancy and I mean a real bad back, I could hardly - well I couldn't get out of bed and I thought I was going to be spending the duration of the pregnancy in bed. So I did go to see a chiropractor and he sorted my back out and the next time I went to the consultant he was amazed at how much more mobile I was - I hopped up on to the bed and everything - and yet another doctor, another consultant who was in the room at the time, said - How did your back get better? Did you see an osteopath? And I said no, I saw a chiropractor and his reaction was - Oh a quack. So I knew there was no point talking to that man about it. And that just shows you two consultants and different attitudes.

#### **JEWELL**

There's an extraordinary dual standard here that medicine in order to be justified, in order to get on to the market, in order to be sold, in order to get it ... has to pass a whole lot of really stringent tests. But if you want a little bit of osteopathy, which is regulated, I mustn't be rude to the osteopaths, but it doesn't have to - the treatment itself doesn't have to pass those tests at all and it's a dual standard.

**FORD**

Dr David Jewell is a GP and editor of the British Journal of General Practice. He's cheerfully old school in his utter scepticism of the efficacy of CAMS but thinks he can guess why orthodox practitioners may sometimes end up recommending them.

**JEWELL**

I've worked alongside people who practise conventional medicine, known lots of people including my own next door neighbour who's a very keen homeopathic doctor, and the only acceptable position for a sceptic is to say well if you can prove to me that it's worthwhile doing we'll take it up and use it.

**FORD**

And yet do you find it surprising that according to a recent survey I think 50% of GPs admit that they will now refer their patients to an alternative practitioner?

**JEWELL**

I find it slightly depressing but I don't find it very surprising. I mean they may do it for all sorts of reasons - they may do it because they don't wish to take up a very negative position, they may do it simply because they're asked to. They may do it, as some people say, because they don't want to get to the point of saying I have nothing further to offer to patients, that becomes a really difficult position to get to. And so complementary medicine does offer a range of things that they can then fall back on, as it were, when they don't think any of their conventional remedies are working.

**GOLDACRE**

When you go and see a doctor these days they're more likely than not to say - Well we don't really know what it could be but we'll try these tablets, they might work, they might also have all of these awful side effects. Whereas an alternative therapist will say - Oh there's an imbalance in your chi, you're deficient in selenium you need to eat more spinach. And they'll say - That's what's wrong with you, this is the treatment, take it. And are paternalistic and didactic in exactly the way that they're accusing mainstream medics of being.

**BAUM**

There is an extraordinary paradox - in the days when doctors were much more certain and confident about what they were doing they were respected more by their lay-people and seldom challenged. And it's very perverse that these days when the vast majority of doctors are taught from day one of their undergraduate curriculum to recognise uncertainty and live with uncertainty and that on the basis of uncertainty we can make progress the profession has lost the respect of the lay-public. And so we do have peddlers of alternative medicine who can fill that gap and say - Well the doctors are uncertain, I'm not. I have learnt to live with uncertainty, I train my students - postgraduate and undergraduates - the necessity, the virtue, the beauty of the uncertainty principle, without which no progress is made.

**FORD**

So with nearly 20 million visits to a complementary therapist taking place every year, there's little doubt CAM is popular. But what about the evidence that it works? Do the research results agree with the punters? And how do you measure success? Next week

we'll explore the debate about the science behind complementary and alternative medicine, and look at some of the implications of this patient led movement.

## **MUSIC**

### **LEWITH**

It's not a new gene, it's not a new antibiotic, it's not Professor Fleming finding penicillin in St. Mary's outside Paddington, drifting in through the London air, it's very different. And it's about this battle, this process of who owns health.