



The CAMbrella project - Statements from the Advisory Board

ECH, ECPM, ICMART, IVAA (CAMDoc Alliance)

ECCH, ANME, EFCAM, EHTPA

EPHA

ECHAMP

Kneipp-Bund

Place

CAMbrella Workshop

European Parliament
Brussels, November 28, 2012



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European council of doctors for plurality in medicine
 Europäische Vereinigung der Ärzteverbände der besonderen
 Therapieeinrichtungen
 Conseil Européen des médecins pour le pluralisme
 thérapeutique



Pan-European Research Network
 for Complementary and
 Alternative Medicine (CAM)

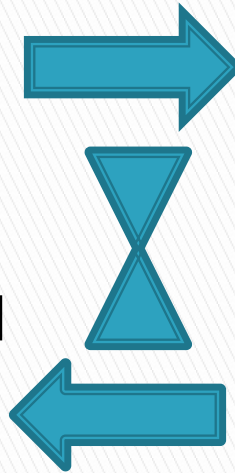
CAMBrella Roadmap

The CAM physicians' view

Physicians' expectations

Physician experience:

- ▶ CAM is requested by citizens
- ▶ CAM is not harmonised in Europe
- ▶ CAM is effective and reasonably safe



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- ▶ Evaluate prevalence and citizens attitude
- ▶ Evaluate the degree of harmonization in Europe
- ▶ Give recommendations regarding the appropriate methodology for CAM research

Trustful Networking

Potitical claim:

CAM should be part of European and national health policies, medical education programmes and research budgets



CAMbrella Final Conference
Brussels 28.11.2012



Pan-European Research Network
for Complementary and
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CAMbrella – the non-medical practitioner perspective

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General Secretary

European Central Council of Homeopaths (ECCH)

CAMbrella Advisory Board Member

and on behalf of

Association for Natural Medicine in Europe (ANME)

**European Federation for Complementary and Alternative
Medicine (EFCAM)**

**European Herbal & Traditional Medicine Practitioners
Association (EHTPA)**

CAMbrella - The experience

The Advisory Board NMCAM members welcomed the CAMbrella Project and its Advisory Board of CAM stakeholders and the invitation of a NMCAM representative to 3 meetings of the project Scientific Steering Committee to be informed of progress.

- There were difficulties in approach to the area of non-medical CAMs by the researchers due to a lack of knowledge and understanding of the sector.
- This was compounded by
 - lack of any common regulation of the sector across Europe
 - few representative associations to talk to and provide information at European level
- By end of the project, through much exchange, the CAMbrella team's understanding had broadened to include the greater part of CAM practice.
- Consultation on a number of the work package deliverables was comprehensive with substantial interchange on several editions of the documents.
- Rather than definitive statements, the final WP documents are seen as the basis for future discussion, refinement and project work, particularly WPs 1 & 5 .
- Engagement on the Research Roadmap through participation in workshops and response to papers resulted in some key inclusions such as the need for real world mixed methods research based on consultation with relevant stakeholders, a model for the future
- Given the project's size & complexity the experience was satisfactory yet with much to learn.

CAMbrella - the expectation

The various Work Package reports present a comprehensive snapshot of CAM in Europe in 2012 that should act in the following way:

- an incentive to encourage member states and EU institutions to regulate appropriately to enable equality of citizen's access to CAM and freedom of qualified practitioners to practise
- stimulate member states to introduce appropriate light-touch regulation for CAM practice & products in full consultation with the professions and manufacturers

The Research Road-map should provide an agenda for future research in CAM that will:

- be taken seriously and result in a varied research agenda including 'real-world' projects
- examine the contribution of CAM to health maintenance, health literacy, illness prevention as well as treatment, and the legal provision of CAM in all appropriate settings that allow it to make the maximum contribution to citizen wellbeing and health

We recommend that the priorities of the Research Roadmap be closely linked to the health and research priorities of the Commission: increased citizen wellbeing and productivity, healthy aging, more sustainable and safe user outcomes of health services, effective prevention and treatment of chronic disease and addressing antimicrobial resistance

We look forward to the funding of a European Research Network for CAM where users, providers and researchers work consensually to determine the research priorities and appropriate methodology to study the specific and integrated impacts of CAM in healthcare



CAMBrella Roadmap: "The health NGO perspective"

CAMBrella Final Conference
28 November 2012, European Parliament

Sascha Marschang
Policy Coordinator for Health Systems
European Public Health Alliance (EPHA)



WHO ARE WE?

The European Public Health Alliance....

- Is a Brussels-based network representing the public health community throughout Europe: health promotion and disease-specific NGOs and organisations representing health professionals, patients, academic groupings and other health associations
- Represents 85 member organisations in EU-27, EFTA, EU applicant & candidate countries and beyond; about **15% fall into the CAM sector**
- Is a "change agent": EPHA's **mission** is to bring together the public health community to provide thought leadership and facilitate change; to build public health capacity to deliver equitable solutions to European public health challenges, to improve health and reduce health inequalities
- Advocates for more citizen involvement and transparency in political decision-making processes on health policy at EU level



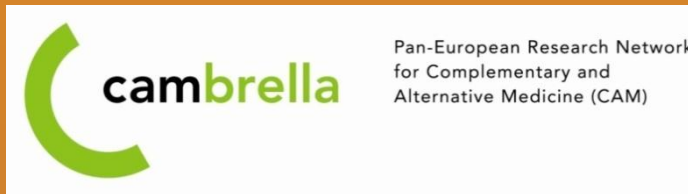
Expectations & Outcomes

CAM contributions to EPHA

- Support of paradigm shift from treatment to **prevention and health promotion** through holistic & salutogenic approach
- Creating an evidence base for CAM's added value and cost effectiveness
- Providing support to **tackle public health challenges**, e.g. demographic change, rise of chronic diseases / multimorbidity, mental health problems

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- Increase research-based knowledge and trustworthy information, promote **equitable access**
- Ensure opportunities for CAM projects in relevant EC programmes
- Evaluate CAM effectiveness and close evidence gaps, build research networks and improve dissemination structures



Expectations & Outcomes

CAM contributions to EPHA

- Explaining the **benefits of CAM for patients** and consumers alongside / as an alternative to conventional treatment options
- Highlighting constraints of CAM providers as part of Europe's wider health workforce

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- Promote harmonisation of high quality information and facilitate cross-border movement for CAM users
- Integration of CAM into (conventional) medical education curricula and establishment of systems for the qualification, accreditation and licensing of CAM providers

Potential claim:

CAM should be **part of European research budgets** to enable it to consolidate its position, be included in relevant EU-level actions and contribute to health policy making alongside non-CAM stakeholders.



European Coalition on Homeopathic and
Anthroposophic Medicinal Products
www.echamp.eu



Pan-European Research Network
for Complementary and
Alternative Medicine (CAM)

CAMBrella Roadmap

The Manufacturers' view

FACTS

ACTS

Large demand for CAM in the EU confirmed

CAM supply should now be organised accordingly

Clear outlook of citizens for integration of CAM-care in health care provisions

Decision makers should act in line with citizens' claim for adequate integration of CAM

Citizens' aims: safety, free choice of treatment modality, particular interest of patients with chronic diseases, emphasis on quality of life

Objective information should be guaranteed as precondition for informed consent and free choice of treatment

The legal and regulatory deficits and the deficits as regards good information are identified

Measures should be undertaken to tackle the deficits of services and information asked for by patients

Solutions for various working fields suggested

Process should end in EU decision making initiatives

FACTS

ACTS

High demand for CAM medicinal products

Availability of CAM medicinal products has to comply with citizens' demand

Major reasons: increasing patient competence and request for more health-sustainability; CAM medicinal products experienced as safe, effective and health-sustainable

These aspects should become a major topic for decision makers as part of making legislation and assessing the impact thereof in society

Products put on the 'health market': wide diversity and need for reliable information

Official information channels/tools to be set up involving experts with experience in the field

The legal and regulatory environment is complex and not fit the purpose

Citizens expect legislation to regulate while respecting their free choice of treatment

Inconsistency of national approaches concerning regulation is obvious and confusing for citizens

More harmonization of rules and regulations is needed. Free choice should be a right all over the EU

Requirements from a patient's point of view

1. **Freedom of choice** – European citizens must have access to CAM.
2. **Right to know** – citizens must have reliable and trustworthy information about the evidence of CAM.
3. **Safety first** – Qualification, accreditation or licensing of CAM providers.
4. **Equal chance** – Stakeholders support the CAMbrella recommendations to include CAM into all health research programs without any discrimination.

Requirements from a patient's point of view

5. **Quality and quality management**– developing structures that allow the dissemination of high quality reliable and trustworthy information about the evidence for and against CAM.
6. Closing the gap – perhaps the promotion of CAM is one way to contribute to a sustainable healthcare system in Europe. There is a **lack of research** in this field.
7. Traditional European complementary and alternative medicine is a treasure which should not be neglected (e. g. Kneipp, Homeopathy). It has a **centuries-old tradition** in Europe.