Legal status and regulation of CAM in Europe

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ECU - European Chiropractors' Union - Executive Council meeting

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CAM Legal Status and Regulations

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NAFKAM, University of Tromsø,Norway ComCAM, Ministry of Health, Italy KI, Karolinska Institutet, Sweden PTE, University of Pecs, Hungary



Place

CAMbrella's Final Conference

Representation of the Free State of Bavaria to the European Union Brussels, November 29, 2012 Professor Dr. Vinjar Fønnebø Senior Adviser Solveig Wiesener, NAFKAM, University of Tromsø, Norway

T Falkenberg, Karolinska Institutet, Sweden G Hegyi, University of Pecs, Hungary J Hök, Karolinska Institutet, Sweden P Roberti di Sarsina, Ministry of Health, Italy

Report 1: CAM regulations in the European countries

Report 2: Herbal and homeopathic medicinal products

Report 3: CAM regulations in EU/EFTA/EEA





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Master thesis by Solveig Wiesener

Disharmonized regulation of Complementary and Alternative Medicine (CAM) in Europe – Implications for patient safety



Master study: Risk management and societal safety January 2013





Regulation of health care in Europe

The EU has repeatedly confirmed that it is up to each member state to organize and regulate their health care system



CAMbrella WP2 Methodology

Data were collected from 39 countries by:

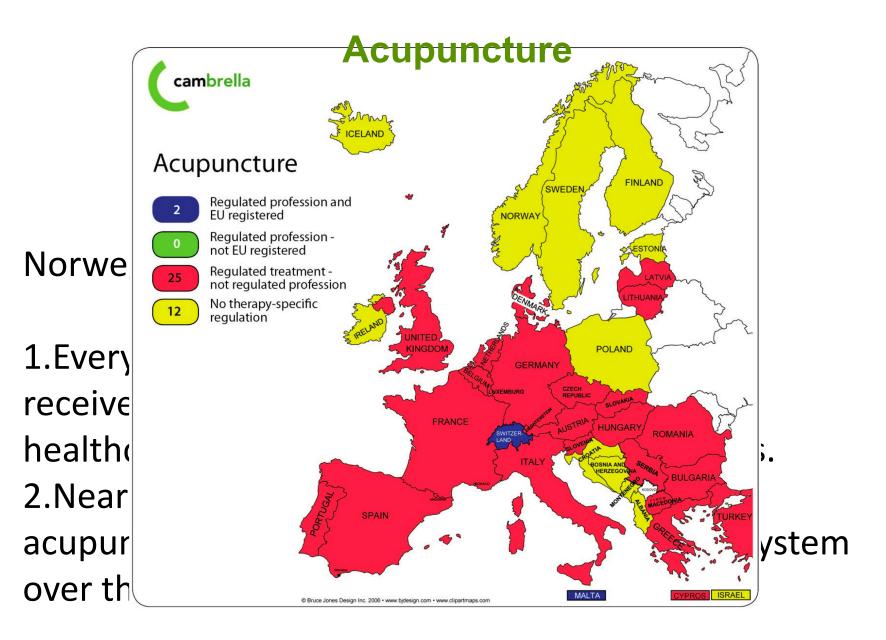
- 1. Communicating with the Ministries of Health, Law or Education, governmental representatives, and members of national CAM associations.
- 2. Searches in the national web sites/databases as well as EUROPA and EUR-lex to identify official legal documents.
- 3. Direct dialogue with European CAM associations/coalitions, CAMbrella members and stakeholders.
- Face-to-face meetings with the Ministries of Health and CAM practitioners representing organizations

European CAM legislation



The only common factor we have found across all 39 nations is the amazing ability they have demonstrated of structuring legislation and regulation differently in every single country, no matter how small the size of the population.



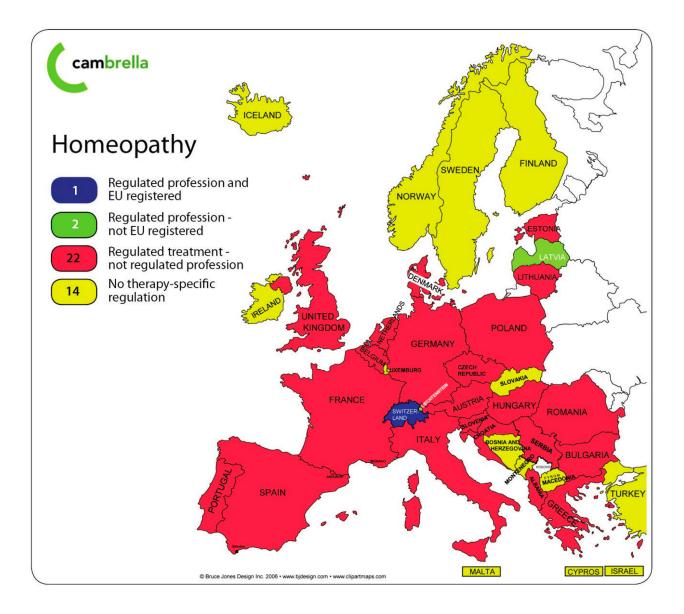




Regulation of herbal medicinal products

Medicinal products are not defined as a part of health policy, and can therefore be regulated at the EU level.

The individual state within the EU/EEA area are therefore no longer free to uphold national regulation of medicinal products in violation of EU directives.





Homeopathy in Sweden

1. "Anyone" not authorized as health personnel can practice homeopathy

2.Health personnel are obliged to "carry out their work in accordance with science and proven experience"

3.BUT, Patient safety issues "trump" this obligation according to the Swedish Supreme Administrative Court



CAM regulation in EU

Two resolutions. Little happened!

The status of "non-conventional medicine". Resolution A4-0075/97

The European Parliament Resolution on how nonconventional medicine should be included more formally as a special field in the European legislation.

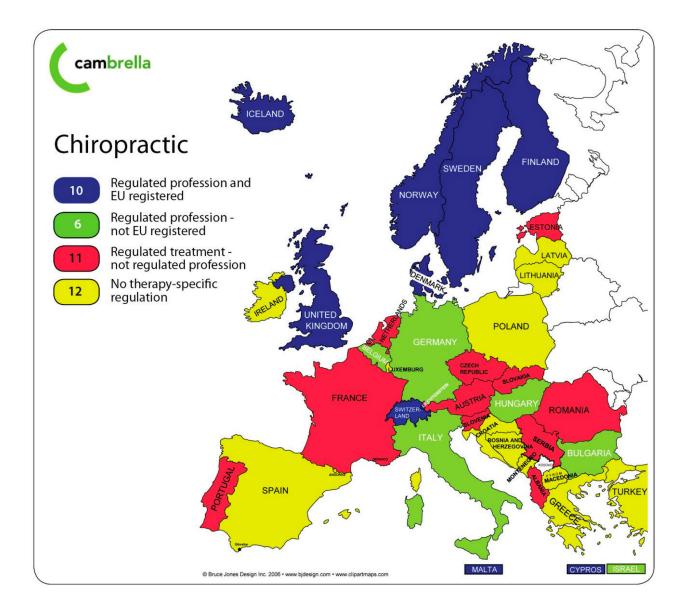
A European Approach to non-conventional medicines. Resolution 1206(1999)

The Parliamentary Assembly of the Council of Europe Resolution on non-conventional medicine.



EU Directives

- 1. Directive 2011/24/EU Patients' rights in Crossborder healthcare.
- 2. Directive 2005/36/EC Professional Qualifications
 - With the EC database of regulated professions.
- Directive 2004/38/EC The right to move and reside freely





Consequences for European patients

- varsity of available treatments and providers A wide
- Every aspect of the 2. le For sir level d
- current situation can Differe ity of 3. servic
- be a threat to patient _{/ices} Unpre 4. provic safety

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Consequences for European CAM practitioners

1. Serious concerns with regard to the predictability,

- Eurc The current situation
- 2. The can be a threat to ^{nd is} patient safety

Consequences for European CAM researchers

- 1. Practices and practitioners are not comparable across national boundaries
- 2. Any observational or experimental study will therefore be generalizable only within a narrow national or cultural context.

This can be a threat to patient safety

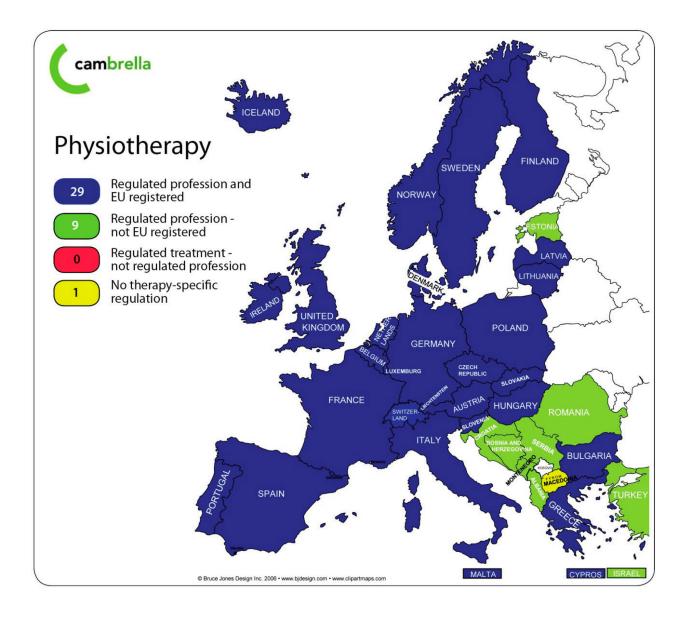


Possible ways forward

- 1. Legislation and regulation at the EU/EEA level
- 2. Voluntary harmonization.

Voluntary harmonization can be done

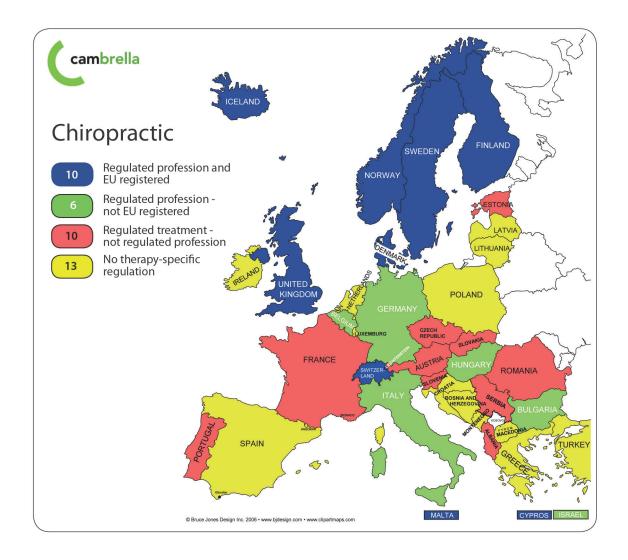




"When patients cross European borders in search of CAM treatment, they may encounter substantial differences in the professional background of apparently identical CAM providers. They may also face a completely different reimbursement system, and if the treatment they undergo results in unwanted adverse or side effects they will be differently safeguarded depending on which state they are in. Every aspect of the current situation can thus be a threat to patient safety. In post-modern Europe where patient choice in health care is seen as a core value, this confusing European market makes any informed treatment-seeking very challenging".

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The legal and regulatory status of CAM and CAM practices

- Legal connection to EUEFTA/EEA and Council of Europe
- CAM general legislation
- Specific treatment (one excel sheet for each treatment) regulation
- EU title (Directive 2005/36/EC)
- Regulated profession/ protected title
- Statutory register
- Medical Doctors (MDs) may practise
- Medical Doctors with CAM training may practise
- Conventional practitioners (CPs) (PS3 post-secondary level 3-4 years) may practise
- Conventional health personnel with CAM training may practise
- CAM practitioner (CAM trained personnel, medical trained, DSE diploma post- secondary education level) may practise
- Others may practise
- Other CAM legislation

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Homeopathy - Who may practice

Country	Specific homeopathy treatment regulation	Medical Doctors (MDs)	Medical Doctors with CAM training	Conventional practitioners (CPs) PS3 ¹	Conventional health personnel with CAM training	CAM practitioner ²	Others may practise	Other CAM legislation	Notes
Albania	Yes	?	?	?	?	?	?	Yes	1
Austria	Yes	Yes	Yes	?	?	?	No	Yes	L.
Belgium	Yes	Yes	Yes	Yes	Yes	?	No	Yes	
Bosnia and Herz.	No	Yes	Yes	?	?	?	No	No	
Bulgaria	Yes	Yes	Yes	No	No	No	No	Yes	
Croatia	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	
Cyprus	No	Yes	Yes	No	No	No	No	Yes	1
Czech Republic	Yes	No	Yes	No	No	No	No	Yes	
Denmark	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Estonia	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	
Finland	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
France	Yes	Yes	Yes	Yes	Yes	No	No	Yes	
Germany	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Heilpraktike
Greece	Yes	Yes	Yes	Yes	Yes	Yes	?	Yes	
Hungary	Yes	No	Yes	No	No	No	No	Yes	1
Iceland	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Healer
Ireland	No	Yes	Yes	Yes	Yes	Yes	Yes	No	1
Israel	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Italy	Yes	Yes	Yes	No	No	No	No	Yes	
Latvia	Yes	Yes	Yes	No	No	No	No	Yes	
Liechtenstein	Yes	Yes	Yes	Yes	Yes	No	No	Yes	
Lithuania	Yes	No	Yes	No	No	No	No	Yes	
Luxembourg	No	Yes	Yes	?	?	No	No	Yes	
Macedonia	No	Yes	Yes	?	?	?	?	Yes	
Malta	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Montenegro	No	Yes	Yes	?	?	?	?	No	
Netherlands	No	Yes	Yes	Yes	Yes	Yes	?	Yes	
Norway	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	0
Poland	Yes	Yes	Yes	Yes	Yes	Yes	?	Yes	
Portugal	Yes	Yes	Yes	Yes	Yes	Yes	?	Yes	
Romania	Yes	No	Yes	No	No	No	No	Yes	
Serbia	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	
Slovakia	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Slovenia	Yes	Yes	Yes	?	?	?	No	Yes	1
Spain	Yes	Yes	Yes	?	?	?	No	Yes	15
Sweden	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Switzerland	Yes *	Yes	Yes	?	?	?	?	Yes	*Naturopath homeopath
Turkey	No	Yes	Yes	?	?	?	?	Yes	
United Kingdom	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	

1) Conventional practitioners (CPs) (PS3 post-secondary level 3-4 years)

2) CAM practitioner (CAM trained personnel, medical trained, DSE diploma post- secundary education level)

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

Regulated profession	Regulated profession	Regulated treatment	No regulation (13)
and EU registered (10)	Not EU registered (6)	Not regulated profession (10)	
Cuprus	Palaium	Albania	Destis 9 Horrogovine
Cyprus	Belgium	Albania	Bosnia & Herzegovina
Denmark	Bulgaria	Austria	Croatia
Finland	Germany	Czech Republic	Greece
Iceland	Hungary	Estonia	Ireland
Liechtenstein	Israel	France	Latvia
Malta	Italy	Portugal	Lithuania
Norway		Romania	Luxembourg
Sweden		Serbia	Macedonia
Switzerland		Slovakia	Montenegro
UK		Slovenia	Poland
			Spain
			The Netherlands
			Turkey

Chiropractor is a regulated profession in 16 of the 39 countries.

10 countries have also registered chiropractor in **the EU regulated professions database**.

Educational and professional regulations differ in these countries, but in most of the 16 countries a chiropractor is recognized as a **conventional health profession**.

10 countries have some regulations on **chiropractic treatment**, but not a regulated profession called chiropractor.

13 countries have **no specific regulation** of chiropractic. However, the treatment may be regulated through CAM general legislation or conventional health legislation.

In some countries chiropractic treatment is regulated as **manual therapies**. In others we found regulations describing that other professionals may treat chiropractic, for example **physiotherapists**.



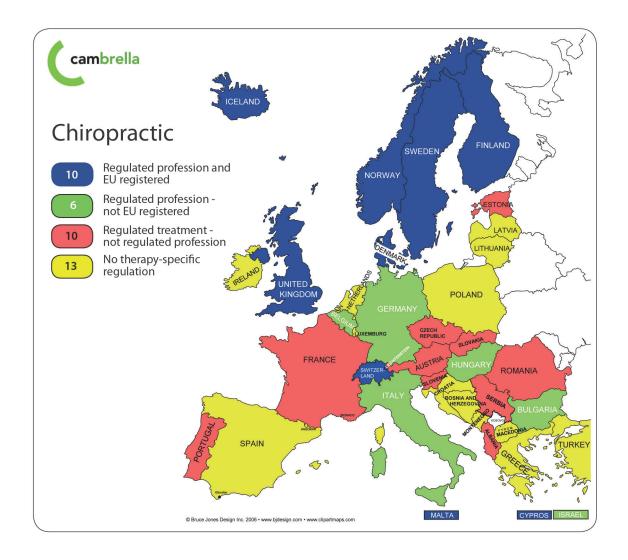
Pan-European Research Network for Complementary and Alternative Medicine (CAM) Ē

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	Regulated profession and EU registered (10)
Cyprus	DSE-diploma (post-secondary education) including Annex II (ex 92/51, Annex C, D), Art. 11 c(<u>4</u>).
Denmark	PS3 – Diploma of post-secondary lever (3-4 years), Art. 11 d.
Finland	PS3 - Diploma of post-secondary level (3-4 years), Art. 11 d.
Iceland	PS3 - Diploma of post-secondary level (3-4 years), Art. 11 d.
Liechtenstein	PS3 - Diploma of post-secondary level (3-4 years), Art. 11 d.
Malta	PS3 - Diploma of post-secondary level (3-4 years), Art.11 d.
Norway	PS3- Diploma of post-secondary level (3-4 years), Art 11 d.
Sweden	PS3 - Diploma of post-secondary level (3-4 years), Art. 11 d.
Switzerland	PS3 - Diploma of post-secondary level (3-4 years), Art. 11 d.
UK	PS4- Diploma of post-secondary level (exactly 4 years)

The European Commission. Regulated professions database. Brussels: EUROPA; 2011 [cited 2012 February 10,]; Available from:

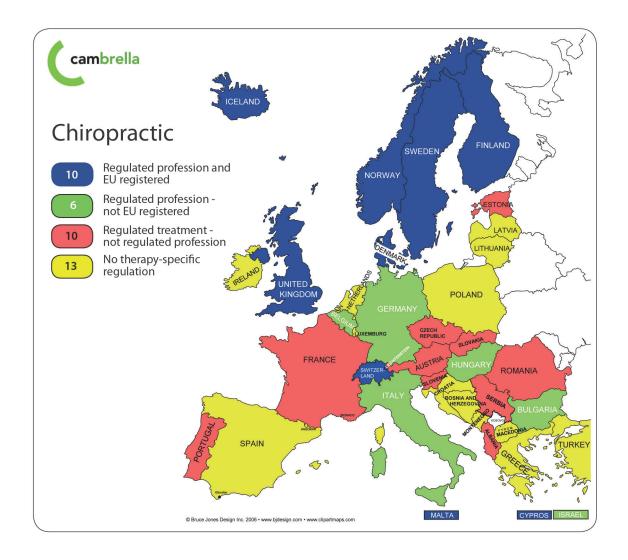
http://ec.europa.eu/internal_market/qualifications/regprof/index.cfm?fuseaction=regProf.index





	Regulated profession - Not EU registered (6)
Belgium	Colla law – Chamber of Chiropractic – not activated
Bulgaria	A master's degree in the professional area of medicine, dental medicine or pharmacology. A specialist's or bachelor's degree in the professional area of health care. A secondary education diploma and a certificate of completed training of at least four semesters at a higher medical school under terms and conditions set out by the Minister of Health and the Minster of Education and Science.
Germany	Regulated by law within the medical association
Hungary	Registered treatment and profession only for MDs with an exam from a medical university
Israel	Chiropractic Status Recognition Certificate from the Ministry of Health,
Italy	Acknowledged chiropractic treatment as a responsibility of a medical doctor, a dentist or primary health professionals with internationally approved chiropractic education







Regulated treatment	Chiropractic treatment regulations		
Not reg. profession (10) Albania	A therapeutic system		
Austria	Specialise physicians in chiropractic manipulation.		
Czech Republic	Public health care, may only be performed as a part of treatment in health		
	facilities by health care professionals like doctors or physiotherapists		
Estonia	Estonian Chiropractic Physicians have full medical diagnostic skills and are		
	trained to provide physiotherapeutic modalities as well as prescriptive		
	therapeutics and rehabilitative exercises		
France	allows medical doctors, midwives, physiotherapists, nurse practitioners and		
	other practitioners to practise chiropractic (diagnosis only by medical doctor)		
Portugal	regulated by the Portuguese Law No 45/2003 on the provision of non-		
	conventional therapies		
Romania	CAM therapy in the group "manual therapies" in the law on CAM 118/2007		
Serbia	CAM bylaw lists chiropractic as a method of treatment suitable for practise		
Slovakia	is legal pursuant to general law- classification "any other medical worker"		
Slovenia	"other CAM systems", a method within "manipulative and body-based methods"		
	A diploma from a medical faculty, knowledge of chiropractic and a valid licence		





No regulation (13)	Members of European chiropractors' Union (EU)		
Bosnia & Herzegovina	A draft of bylaw currently under preparation		
Croatia	See the law of national classification of services		
Greece	Hellenic Chiropractors' Association		
Ireland	Chiropractic Association of Ireland		
Latvia	Only MD's may provide diagnostic methods and treatment		
Lithuania	Manual therapy are listed as medical medical specialties only to be practised by MD's		
Luxembourg	Chiroletzebuerg. Treatment restricted to regulated health personnel.		
Macedonia	Activities related to CAM– only if permission from MoH		
Montenegro	National CAM regulations in progress		
Poland	Polish Chiropractic Association. Only MD's may treat patients.		
Spain	Asociación Española de Quiropráctica. CAM in general not regulated.		
The Netherlands	Nederlandse Chiropractoren Associatie. Chiropractic is CAM.		
Turkey	Turkish Chiropractic Association. MD's with additional qualification		



Runciman et al. defines **patient safety** as "the reduction of risk of unnecessary harm associated with healthcare to an acceptable minimum"

Risk governance giving preference to patient safety **includes regulation as an important management tool.**

Regulations of importance for patient safety can cover requirements on

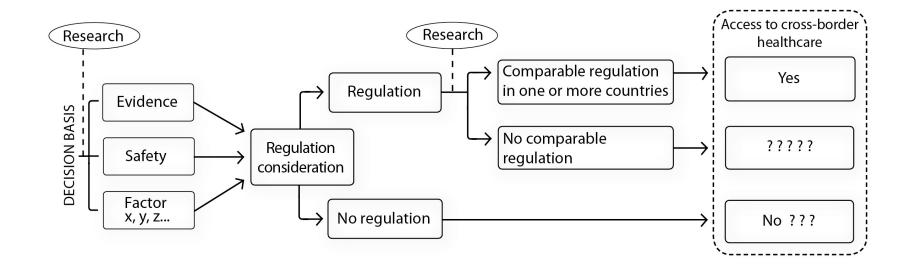
- Provider education and training
- Provision of standardized and safe treatments
- Mandatory or voluntary professionals' registers
- Supervision (given authority through legislation)
- Professional title protection

Patients' rights can cover:

- Correct information
- Safe treatment and provider choice
- Right to submit treatment claims
- Reimbursement of treatment costs



Relationship between research, national regulation and cross-border Healthcare accessibility.





Conclusion

- CAM in Europe is not regulated in accordance with current theory dealing with
- risk governance,
- risk regulation
- patient safety.
- European CAM regulation is **diverse and unclear**.
- Consequently, the disharmonious landscape of CAM regulation in itself may impact patient safety.



Recommendations

- Regulation of CAM could be embodied within a risk governance system covering conventional, alternative and complementary health care services.
- Treatment standardization, CAM terminology clarifications and provider harmonization together with CAM research will probably strengthen the safety of CAM patients in Europe.
- An **EU Directive on CAM** could be developed (like Cross-border Healthcare and regulation of health care professionals).
- Development towards European harmonized regulation of CAM would probably give patients, health care providers, researchers and governmental authorities a similar standardized, informed and safe decision platform.



Thank you!



Geneva, Red Cross museum