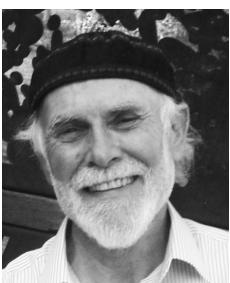


# Response to the final NH&MRC report in March 2015

Dr Isaac Golden, Australia



Dr Isaac Golden Ph.D, D.Hom., N.D., B.Ed(Hon)

Director, Australasian College of Hahnemannian Homoeopathy

Isaac Golden has been a homoeopathic practitioner since 1984, and teaching since 1988. He founded the Australasian College of Hahnemannian Homoeopathy in 1990, which offers distance education courses in homoeopathic and natural medicine. Isaac is a regular contributor to local and international academic journals, and is the author of eleven books on homoeopathy. He is a world authority on homoeoprophylaxis - the use of homoeopathic medicines for specific infectious disease prevention - and was the first person to be awarded a PhD from a mainstream Australian University for research on a homoeopathic topic. He is currently an Honorary Research Fellow in the School of Science at Federation University Australia.

Isaac was President of the Victorian branch of the Australian Homoeopathic Association - Australia's largest national organization of professional homoeopaths - from 1992 to 1998. In March 1999 he was awarded the Association's Distinguished Service Award for his "many years of service to the Australian Homoeopathic Association and for his significant contributions to the homoeopathic profession in Australia."

To remain consistent with the NH&MRC report's spelling of 'homeopathy', this style has been maintained throughout this article, Ed.

## Introduction

The NH&MRC released its final report into Homeopathy on 11.3.15<sup>1</sup>. Consistent with the previously released 2014 draft report, the final 2015 report stated: "Based on the assessment of the evidence of effectiveness of homeopathy, NHMRC concludes that there are no health conditions for which there is reliable evidence that homeopathy is effective".

It is expected that the NH&MRC report will be used to attempt to limit the use of homeopathy in Australia, and to persuade private health insurers to no longer cover homeopathy. For example, "Professor Paul Glasziou, chair of the NHMRC Homeopathy Working Committee ... said at the moment the NHMRC would discourage people from using homeopathy for any health condition"<sup>2</sup>.

It is important that Australian practitioners are able to simply and factually respond to this report when asked by patients and others. The following analysis provides facts and talking points for practitioners.

## Analysis

A detailed response to the NH&MRC draft report was published by the author in June 2014<sup>3</sup>.

It noted that the draft report began by making the following **exclusions of evidence** from its analysis:

Evidence of "whether homeopathy is good for general health."

"Evidence for whether or not homeopathy is effective for preventing health conditions".

Any evidence examining the economic cost-benefits of homeopathy.

Evidence supporting homeopathy that was not derived from "prospective, controlled studies", such as "observational studies,

individual experiences and testimonials, case series and reports, or research that was not done using standard methods."

The response proposed that the NH&MRC draft report failed four tests:

**The common sense test:** It contradicted the fact that over the last 200 years homeopathy has been used successfully by billions of people, and has been administered by hundreds of thousands if not millions of practitioners with MB BS (or equivalent) qualifications as well as others with specialised health science and homeopathic training, and is part of government public health systems in countries around the world.

**The reasonable question test:** The NH&MRC should have asked *can properly prescribed homeopathic medicine make a positive contribution to the total health and wellbeing of Australians and contribute to reducing the cost burden of chronic disease on the Australian health budget?* Instead the authors asked the question *"Is homeopathy an effective treatment for health conditions, compared with no homeopathy, or compared to other treatments?"*

- The appropriate methodology test:** A number of methodological flaws in the NH&MRC analysis were identified arising from their reliance only on systematic reviews of randomised controlled trials. Their approach stands opposed to the W.H.O. call for researchers to "Develop research methodologies consistent with T&CM theories and practice"<sup>4</sup>.
- The freedom from bias test:** Eight points of bias were identified in the NH&MRC report. One of the most obvious was the fact that the NH&MRC had already arrived at the conclusion in 2012 that "it is unethical for health practitioners to treat patients using homeopathy, for the reason that homeopathy (as a medicine or procedure) has been shown not to be efficacious"<sup>5</sup>. Their conclusion was based on a 2005 study which was subsequently shown to have been manipulated by

the researchers to reach a negative conclusion regarding homeopathy<sup>6</sup>. The current study was a statistical analysis designed to support their 2012 conclusion.

In addition to these failures further concerns arise from the following four statements made by the NH&MRC in the final report.

**(i) NH&MRC:** "This work was overseen by the Homeopathy Working Committee established by the NHMRC".

**FACT:** The working group did not include anyone with an expertise in homeopathy. It comprised a medical practitioner/researcher, a rheumatologist, a neuroscientist, a consumer who sits on other NH&MRC committees and a pharmacist. One of the working group had been a member (prior to his NH&MRC appointment) of *Friends of Science in Medicine*, a well-connected lobby group strongly opposed to complementary medicine in general, and homeopathy in particular. These people may be eminent in their own fields, but none possessed specific homeopathic training or experience in homeopathy and at least one was openly biased against homeopathy.

**(ii) NH&MRC:** "The assessment of the evidence used standardised, accepted methods for assessing the quality and reliability of evidence for whether or not a therapy is effective for treating health conditions".

**FACT:** According to statements uncovered using a freedom of information request by the Complementary Medicines Association (CMA), "Two out of three Experts who NHMRC consulted prior to publication expressed numerous concerns over the methodology and selective use of the data and recommended the NHMRC could not come to the very definitive conclusion that it came to. The NHMRC then chose to ignore these Expert Opinions"<sup>7</sup>.

The CMA also found other flaws in the methodology: "NHMRC provides no adequate explanation of why randomised controlled trials (RTC) were excluded from the Review. The NHMRC decision not to adhere to a search of all Level 1 evidence, as per International standards, should certainly be justified. ... The choice of databases searched was not broad enough to capture the balance of complementary medicine specific content, and excluded non-English studies. ... NHMRC did not provide an adequate explanation of why only systematic reviews were used where systematic reviews have inherent weakness as a reliable source of evidence"<sup>6</sup>.

The Australian Homeopathic Association response to the final report detailed even more divergences from accepted methodological methods, and asked questions of Professor Warrick Anderson, CEO of the NH&MRC, which to date have not been answered<sup>8</sup>. These included questions regarding Anderson's statements opposing homeopathy made both before and during the NH&MRC review, a highly inappropriate practice during a supposed unbiased scientific inquiry.

**(iii) NH&MRC:** "An approach, similar to that of a Health Technology Assessment, was used to consider the outcomes of the assessment of the evidence".

**FACT:** This statement is untrue.

The World Health Organisation defines a Health Technology Assessment (HTA) as "the systematic evaluation of properties, effects, and/or impacts of health technology. It is a multidisciplinary process to evaluate the social, economic, organizational and ethical issues of a health intervention or health technology."<sup>9</sup>

Even the Australian Government Department of Health guidelines for a HTA state that "The key questions that HTA typically aims to answer for each new health technology, in comparison to alternative interventions, are: \* Is it safe? \* Does it improve health outcomes? \* Is it cost effective? Effective assessment of health technologies includes: \* evaluating the comparative harms and benefits, using clinical evidence of patient safety, efficacy and clinical effectiveness; and \* understanding the cause, origin and prevalence of disease and knowledge of best practice treatment pathways."<sup>10</sup>

Clearly the NH&MRC report was not an HTA.

However an HTA should have been used to determine if homeopathy is a useful addition to health care in Australia. Indeed this was required of the NH&MRC for its report to the Departments of Health's (DoH) *Review of the Australian Government Rebate on Private Health Insurance for Natural Therapies*. The DoH stipulated that cost-effectiveness, safety and quality of each therapy be assessed along with clinical efficacy. The NH&MRC report does not comply with this requirement.

In fact a substantive HTA was conducted in 2005 as part of a Swiss Government examination of homeopathy. To determine effectiveness of homeopathy the authors examined 22 systematic reviews which met appropriate criteria, covering 563 analysed studies, and found that "A synopsis of study results found at least a trend in favour of homeopathy in 20 of 22 reviews"<sup>11</sup>. They also examined the safety and cost-effectiveness of homeopathy and other parameters used in HTAs, which supported the use of homeopathy.

It is reasonable to question why the NH&MRC chose NOT to undertake an HTA, but instead chose a narrowly defined and contrived analysis of disease effects. It is highly likely that a properly conducted HTA would not have supported their pre-determined conclusion.

**(iv) NH&MRC:** "There was no reliable evidence from research in humans that homeopathy was effective for treating the range of health conditions considered: **no good-quality, well-designed studies with enough participants for a meaningful result** reported either that homeopathy caused greater health improvements than placebo, or caused health improvements equal to those of another treatment". (emphasis added)

**FACT:** This statement is untrue.

An examination of the Optum report commissioned by the NH&MRC and from which they drew conclusions, shows that they identified 298 studies in different disease scenarios<sup>12</sup>. Some studies were included twice as they covered more than one disease or research setting. A summary constructed by the author using Optum's own

raw data, reporting quality and result (before Optum's interpretation) is shown in Table 1.

| Result            | #          | Quality   |                  |                  |            | #          | %            |
|-------------------|------------|---|------------------|------------------|------------|------------|--------------|
|                   |            | High <sup>a</sup>   | Med <sup>b</sup> | Low <sup>c</sup> | Not Known  |            |              |
| Strongly positive | 74         | 23  | 9                | 11               | 31         | 74         | 24.8         |
| Tending positive  | 78         | 14  | 11               | 17               | 36         | 78         | 26.2         |
| Not positive      | 135        | 38  | 18               | 31               | 48         | 135        | 45.3         |
| Negative          | 3          | 0   | 0                | 1                | 2          | 3          | 1.0          |
| Mixed             | 8          | 2   | 2                | 0                | 4          | 8          | 2.7          |
| <b>Total</b>      | <b>298</b> | <b>77</b>   | <b>40</b>        | <b>60</b>        | <b>121</b> | <b>298</b> | <b>100.0</b> |
| Quality gradings: |            | <sup>a</sup> High: Jadad score 4,5; Other measures >75%   |                  |                  |            |            |              |
|                   |            | <sup>b</sup> Medium: Jadad score 3; Other measures 45-74% |                  |                  |            |            |              |
|                   |            | <sup>c</sup> Low: Jadad score 1,2; Other measures 0-44%   |                  |                  |            |            |              |

Table 1: The Effectiveness of Homeopathy and the Quality of Study as shown by Optum

Whilst Optum stated that "most of the primary studies were small in size"<sup>12</sup>, they did not state that there were none as claimed by the NH&MRC. Clearly the NH&MRC knew that high quality studies which show a strong positive effect from homeopathy existed. Further, these studies were found despite the NH&MRC limiting their report to exclude other high quality level 1 studies of homeopathy.

## Summary of Findings

The findings of the above analysis are summarised below. Practitioners may, if they wish, show this summary to patients who have been concerned by the NH&MRC report and the subsequent media statements claiming that homeopathy is ineffective.

## A Summary of Responses to the 2015 NH&MRC Report

1. The NH&MRC had concluded in 2012 that homeopathy was ineffective, and designed the 2015 analysis to support this conclusion.
2. The NH&MRC ignored the opinions of their own experts concerning the methodological limitations of the analysis which failed to use accepted research methods.
3. The NH&MRC panel contained no members with expertise in homeopathy.
4. The NH&MRC defined away any considerations of whether homeopathy can promote health, whether it can prevent disease, whether it is safe and whether it is cost-effective. This was despite the fact that the NH&MRC had been tasked by the Department of Health to assess the cost-effectiveness, safety and quality of each therapy along with clinical efficacy.
5. The NH&MRC falsely claimed that there were no high quality studies that supported homeopathy. Yet their chosen researchers (Optum) identified many high quality studies.
6. The NH&MRC falsely claimed that their analysis was similar to a Health Technology Assessment, which takes into account the full range of effects of the method being studied. The most recent HTA of homeopathy undertaken for the Swiss government, treated dismissively by the NH&MRC, was strongly supportive of homeopathy.

7. The NH&MRC gave weight to a UK House of Commons Report (the recommendations of which were not accepted by the House of Commons) which in turn relied on subsequently discredited research, published in 2005, which manipulated data to construct a negative conclusion against homeopathy.
8. Eight areas of bias have been identified within the NH&MRC report.
9. The NH&MRC report is inconsistent with the fact that over the last 200 years homeopathy has been used successfully by billions of people, and has been administered by hundreds of thousands of practitioners with MB BS (or equivalent) qualifications as well as others with specialised health science and homeopathic training, and is part of government public health systems in countries around the world.
10. The W.H.O. Traditional Medicine Strategy, 2014-2023, recommends integration of traditional and complementary medicines, including homeopathy, into national health systems. The NH&MRC report clearly shows that they have the opposite intention. A reasonable person may question why.

## Conclusions

The 2015 NH&MRC report into the effectiveness of homeopathy has been constructed to support the negative suppositions against homeopathy which the NH&MRC stated in 2012. They have used the old maxim in statistics: if you want the right answer, ask the wrong question.

The NH&MRC chose not to use the most appropriate form of analysis of a therapeutic system, a Health Technology Assessment, which examines relevant features such as the safety, effectiveness and cost-benefit of the system. Instead they have deliberately defined out of their report any consideration of the health creation, disease prevention, safety, and cost-benefit characteristics of homeopathy.

And even then, they have incorrectly stated that there are no high quality studies supporting homeopathy despite the fact that the researchers they appointed identified many such studies.

The motives behind such a deliberate and non-science attack on one of the most commonly used forms of complementary medicine internationally must be questioned. Hopefully the NH&MRC will be required to justify the cost to taxpayers of this heavily biased report.

The way forward, as supported by the World Health Organisation, is for all forms of effective medicines to be used together in public health systems which emphasise health creation, which implement disease prevention, which use safe and cost-effective treatments, and which put patient wellbeing before profits and vested interest.

If the NH&MRC decides to adopt these goals as their top priority then they will find the homeopathic community a willing and receptive partner. In the meantime, homeopaths need to stand firm, knowing that the truth of their modality stands in the everyday clinical results seen by their patients and themselves, in over 200

years of successful use around the planet in billions of people, and in comprehensive and high quality research supporting the effectiveness, safety and cost-benefit of homeopathy.

#### (Endnotes)

1. NH&MRC. NHMRC Statement: Statement on Homeopathy. 11.3.2105. <https://www.nhmrc.gov.au/media-releases/2015/nhmrc-releases-statement-and-advice-homeopathy>. Accessed 15.3.2105.
2. Aged & Community Services Australia. NHMRC: no evidence homeopathy works. <http://agedcareinsite.com.au/2015/03/nhmrc-no-evidence-homeopathy-works/>. Accessed 15.3.2015.
3. Golden I. Response to NH&MRC Draft Report on Homeopathy. *Hpathy*. June 2014. <http://hpathy.com/homeopathy-papers/response-nhmrc-draft-report-homeopathy/>
4. World Health Organisation. *WHO Traditional Medicine Strategy 2014 – 2023*. World Health Organization 2013, Geneva. Page 39, 48.
5. NH&MRC. DRAFT NH&MRC Public Statement on Homeopathy. March, 2012.
6. Shang et.al. Are the clinical effects of homoeopathy placebo effects? Comparative study of placebo-controlled trials of homoeopathy and allopathy. *Lancet*. 2005; Vol. 366. p.729.
7. Complementary Medicines Association. Media Release: CMA Disappointed with NHMRC Statement on Homeopathy. 11.3.15. xxx (accessed 15.3.15).
8. Australian Homeopathic Association. Letter to Professor Anderson. 11.3.2015.
9. World Health Organisation. Health technology assessment. [http://www.who.int/medical\\_devices/assessment/en/](http://www.who.int/medical_devices/assessment/en/). Accessed 15.3.2015.
10. Department of Health, About Health Technology Assessment. <http://www.health.gov.au/internet/hta/publishing/nsf/Content/about-1>. Accessed 15.3.2015.
11. Bornhöft G, Matthiessen P, editors. *Homeopathy in healthcare – Effectiveness, appropriateness, safety, costs*. Berlin: Springer; 2012. Page 206.
12. Optum. Effectiveness of Homeopathy for Clinical Conditions: Evaluation of the Evidence. October, 2013.

## IN THE NEWS

### Boiron Wins Class Action in Canada

Sourced from: <http://www.homeopathy-ich.org/> on 28.3.15

Good news on the Boiron case in Canada. After almost three years of legal wrangling, the class action suit instigated by the anti-homeopathy organisation Centre for Inquiry (CFI) against Boiron Canada in Quebec has been dismissed. Another similar suit in Ontario is still in process, but its chances of succeeding now seem much more remote.

Boiron, Canada's largest manufacturer of homeopathic medicines, was served with papers in April of 2012 after Adanna Charles of West Montreal and her son took doses of Boiron's Oscillo products for 'flu and allegedly noticed no relief. According to her story, she decided to launch the suit after learning via the Internet that Boiron had settled a US class action suit earlier, and a friend recommended a class-action lawyer.

But CFI at first made no secret of its heavy involvement with the lawsuit, sending out a press release which it later removed from its Canadian website, and sending out calls for people to join the class action.

According to Iain Martell, then head of CFI's anti-homeopathy division, its strategy was to legally attack the largest homeo-pharmacy along with the largest drugstore selling Oscillo products (Shoppers Drug Mart, in a separate suit) so as to make an example of them, as part of a contemplated campaign of successive lawsuits.

"If we win with this case, that sets an example for everyone else," Martell wrote in a comment on the website of the Canadian Atheist. "A

hefty fine against Boiron might lead other snake oil producers to be more careful in their labelling. And so on... until the next lawsuit." The comment was subsequently deleted, but not before 3CH took a screen capture of it.

In the Quebec Superior Court decision handed down on January 19, Judge Louis Lacoursière completely rejected as evidence three opinion pieces by anti-homeopathy authors (including McGill University's Joe Schwarcz) or in anti-homeopathy publications. He wrote:

"Again, the Court is reluctant to hold that there is an arguable case to be made that Oscillo products have no effect on the symptoms of 'flu sufferers strictly on the basis of these articles alone, notably because of the fact that Oscillo products have successfully met the requirements of Health Canada, have been approved for sale and, also, because these articles seem, at first glance, to be all out attacks on homeopathy."

The judge also rejected Adanna Charles as a suitable representative for other people who supposedly suffered damages from buying Oscillo products, because she did nothing about the supposed problem until she spotted the article about the American lawsuit about six months later.

In this instance, there is no allegation that Petitioner communicated with Boiron, complained, asked questions. There is no allegation that she attempted to find people who had used the Oscillo products and were dissatisfied. What seems, *prima facie*, to be the real trigger of the recourse is the lawyer-induced opportunity to obtain a settlement in Canada, because one was achieved in the U.S. against Boiron U.S.A., based, *prima*

*facie*, on different circumstances, including the representations by Boiron U.S.A. on the presence of an 'active ingredient'."

For these and other reasons, Judge Lacoursière dismissed the suit and awarded Boiron costs, meaning that Charles and/or any supporters she might have, if they are willing, will have to pay a substantial amount of Boiron's hefty legal bill.

Boiron is staying low-key about the decision, but others in the homeopathic community are celebrating it as a major victory for homeopathy in Canada.

### Congratulations to Ontario homeopaths

Sourced from <http://www.homeopathy-ich.org/> on 5.4.15

After many years planning and effort by the homeopathy profession in Ontario, Canada, the Homeopathy Act of 2007 was proclaimed on 1 April 2015. The provisions of the Act include the authority to register homeopaths, administer a quality assurance program, and receive and investigate complaints and reports. Above all this Act means protection for patients who consult homeopaths registered with the College of Homeopaths register. For further information refer to the following web site: <http://www.collegeofhomeopaths.on.ca/pages/news.html>

The text of the Act can be found here:

[http://www.e-laws.gov.on.ca/html/statutes/english/elaws\\_statutes\\_07h10\\_e.htm](http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_07h10_e.htm)

**This Act is another step in the recognition and regulation of the homeopathy profession that, step by step, is taking place around the world.**