



The Roadmap for
European CAM Research

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Complementary and Alternative Medicine (CAM) is an important healthcare sector in Europe – but too little is known about it

Researchers of the EU project CAMbrella call for a coordinated approach in a “Roadmap for European CAM research”

Brussels, November 29, 2012 - Today the scientists of CAMbrella, a EU funded pan-European research network for CAM, present the findings of their three years' work. They confirm that knowledge, provision and handling of CAM differs greatly in Europe and that CAM is a much neglected area of research. Compared to North America, Asia and Australia, Europe lags behind in its approach to CAM and a centralized and coordinated effort to enhance the knowledge about this field is urgently needed. Thus, the researchers call for a coordinated European approach which they laid out in the core paper of the project, the “Roadmap for European CAM research”.

CAM is highly demanded in Europe: The CAMbrella project has identified that as many as half of all citizens in Europe use complementary and alternative medicine for their healthcare needs; this is in line with the WHO (World Health Organisation) global atlas of traditional, complementary and alternative medicine, which also concludes that CAM is highly prevalent in Europe. Speaking at the final conference in Brussels today, project coordinator **Dr Wolfgang Weidenhammer** said, “Citizens are the driver for the use of CAM. Their needs and views on CAM are a key priority and their interests must be investigated and addressed in future CAM research.”

There are more than 150,000 registered medical doctors with additional CAM certification and more than 180,000 registered and certified non-medical CAM practitioners. This suggests up to 65 CAM providers per 100.000 inhabitants - however, regulation of and education in CAM is different in all the 39 European countries. Reflecting this fact, **Prof. Vinjar Fonnebo** (work package leader on regulation) added: “Health professionals must give safety and security to their patients and clients. The current EU regulation and education chaos for CAM provision makes this an impossible task.”

Substantial lack of data about CAM

Europe so far has not looked into this health care field thoroughly. With the noticeable exception of the UK, Norway and Switzerland the knowledge about the prevalence of CAM use by European

citizens and patients is widely unknown. The needs of citizens regarding CAM provision have not been researched in most of the European countries and nothing much is known about the providers concerns.

What is CAM and what do people use it for?

CAM is an umbrella term for popular treatment strategies mostly outside conventional medicine. Practices like herbal medicine, homeopathy, manual therapy (massage, osteopathy and reflexology) or acupuncture, to name the most prominent ones, are applied in the care for chronic conditions, disease prevention and health management. But CAM also includes less known practices as anthroposophic medicine and naturopathy.

*„The **patients’ approach to CAM** is not a philosophical, but a pragmatic one. Patients look for professionals whom they can trust in their efforts to come to terms with their illness. Trust needs more than the perfect chemo or the impeccable surgery and it needs more than being a nice person. It needs expertise in methods and procedures that enable the patient to meet his own challenges and it needs people who are not afraid of patients. Much of the medicine we encounter is afraid of the patients as persons.“*

This is how **Kurt Langbein**, well known German language Health journalist and cancer patient himself, puts the patients’ perspective in the centre of his invited speech at the CAMbrella conference.

The CAMbrella „Roadmap for European CAM research“

The CAMbrella researchers call on the EU to support and implement CAM research that pays proper attention to this unclear situation and to the real world conditions of European healthcare.

Invited speaker **Prof. Jarle Aarbacke**, rector of Europe’s most northern University in Tromsø, Norway:

“CAM has many faces; from folk medicine, traditional herbal remedies and hands on procedures to modern techniques like for instance Laser Acupuncture or Hyperthermia the range is huge. One of the few common features in CAM is that we know very little about it because it usually is not part of the medicine we teach and learn in European universities. It is time to take this medicine into account and look into it thoroughly. It is there anyway so we better try to know more about it.”

The CAMbrella roadmap asks for a European centre of CAM that implements and realizes the proposed research strategy. Such a centre would allow the researchers to bear the following challenges: determining the prevalence of CAM in Europe; researching on the most promising CAM treatments for the most common health problems such as obesity, diabetes and cancer; reviewing the patient safety, checking the EU citizens’ needs; integrating opportunities and risks of CAM into standard treatments; working out a uniform, scientifically based approach, and disseminating the results in a coordinated manner to the EU population.

“CAMbrella’s vision is for an evidence base to be established which enables European citizens and policy makers to make informed decisions about CAM” summarizes **Dr. Wolfgang Weidenhammer** at the conference today.

Notes for editors

1. In the CAMbrella project 16 partner institutions from 12 European countries have been working together to develop a “roadmap for future European CAM research” that is appropriate for the health care needs of EU citizens and acceptable to the EU Parliament as well as their national research funders and health care providers.
2. CAMbrella consists of academic research groups which do not advocate specific CAM treatments.
3. CAMbrella’s aim was to enable meaningful reliable comparative research and communication within Europe and help to create a sustainable structure and policy for CAM in Europe. The project was funded under the Seventh Framework Programme (FP7) of the European Commission since January 2010.
4. The project findings were presented at a final conference in Brussels, hosted by the Bavarian Representation on November 29, 2012.
5. A lack of data in the majority of member states meant that it was only possible to study 18 of the 39 member states and associated countries.
6. Use of herbal medicine was the most frequently reported use of CAM. The most reported conditions for the use of CAM were musculoskeletal problems.

Contact

For further details including a summary of key findings of the project please contact Bettina Reiter on +43 699 1717 8682 or e-mail media@cambrella.eu