

# Referral, Appropriateness and Demand for Acupuncture in Australia

NEW STUDY REVEALS POSITIVE TRENDS FOR "COMPLEMENTARY THERAPIES"

Editorial Staff

A recent study published in the Medical Journal of Australia<sup>1</sup> reveals that the trend toward the use of (and referral to) "complementary therapies" is occurring in Australia in ways similar to the trend in the United States. The study also shows that while acupuncture is well-accepted by Australian doctors, more evidence demonstrating the effectiveness of alternative forms of care is still needed.

A self-administered 11-page postal survey was mailed to 800 general medical practitioners (GPs) in the state of Victoria, with just under two-thirds (64%) responding. The first series of questions related to how "harmful" the GPs thought a form of complementary care was versus its effectiveness. According to the respondents, acupuncture was considered not only the most effective therapy, but also among the least harmful:

| Type of Treatment         | Frequently/<br>Occasionally<br>Harmful | Highly/<br>Moderately<br>Effective |
|---------------------------|--|------------------------------------|
| Acupuncture               | 16%                                    | 88%                                |
| Chiropractic              | 82%                                    | 81%                                |
| Hypnosis                  | 29%                                    | 78%                                |
| Meditation                | 2%                                     | 82%                                |
| Osteopathy                | 40%                                    | 39%                                |
| Herbal medicine           | 58%                                    | 33%                                |
| Naturopathy               | 15%                                    | 33%                                |
| Vitamin & mineral therapy | 47%                                    | 27%                                |
| Spiritual healing         | 14%                                    | 22%                                |
| Homeopathy                | 33%                                    | 19%                                |
| Aromatherapy              | 6%                                     | 17%                                |
| Reflexology               | 13%                                    | 8%                                 |

Acupuncture was one of only five forms of care the GPs rated as being more effective than harmful. Compared to other commonly used forms of care such as osteopathy and homeopathy, acupuncture was considered at least twice as effective, but only half as harmful.

The second series of questions focused on which forms of care were "appropriate for trained GPs to practice" and which "should be eligible for Medicare rebates":

| Type of Treatment | Appropriate for<br>Trained GPs to<br>Practice | Should be<br>Eligible for<br>Medicare |
|-------------------|---|---------------------------------------|
|-------------------|---|---------------------------------------|

|                           |     |     |
|---------------------------|-----|-----|
| Acupuncture               | 97% | 91% |
| Hynosis                   | 92% | 91% |
| Meditation                | 80% | 77% |
| Chiropractic              | 55% | 69% |
| Vitamin & mineral therapy | 44% | 54% |
| Herbal medicine           | 43% | 53% |
| Naturopathy               | 28% | 42% |
| Osteopathy                | 27% | 44% |
| Homeopathy                | 23% | 36% |
| Spiritual healing         | 18% | 27% |
| Aromatherapy              | 17% | 24% |
| Reflexology               | 11% | 22% |

One of the most interesting questions asked was whether a GP had "ever referred patients" to a particular type of treatment versus whether they would "encourage a patient's suggestion to attend" that form of treatment:

| Type of Treatment         | Ever Referred Patients | Encourage a Patient's Suggestion to Attend |
|---------------------------|------------------------|--|
| Acupuncture               | 97%                    | 91%  |
| Hynosis                   | 92%                    | 91%  |
| Meditation                | 80%                    | 77%  |
| Chiropractic              | 55%                    | 69%  |
| Vitamin & mineral therapy | 44%                    | 54%  |
| Osteopathy                | 43%                    | 53%  |
| Naturopathy               | 28%                    | 42%  |
| Herbal medicine           | 27%                    | 44%  |
| Spiritual healing         | 23%                    | 36%  |
| Homeopathy                | 18%                    | 27%  |
| Aromatherapy              | 17%                    | 24%  |
| Reflexology               | 11%                    | 22%  |

Acupuncture ranked highest as a form of care for which GPs had referred patients and second only to meditation as a form of care which they would encourage their patient's suggestion to attend. Acupuncture also ranked highest in terms of frequency of referrals; 19% of the GPs surveyed said they referred patients to an acupuncturist at least monthly, while 10% reported referring to acupuncturists at least weekly.

The final series of question focused on GPs who had trained in a particular form of complementary therapy and those who would be interested in more training:

| Type of Treatment         | Have Trained | Interested in Training |
|---------------------------|--------------|------------------------|
| Meditation                | 97%          | 91%                    |
| Hynosis                   | 92%          | 91%                    |
| Acupuncture               | 80%          | 77%                    |
| Herbal medicine           | 55%          | 69%                    |
| Vitamin & mineral therapy | 44%          | 54%                    |
| Naturopathy               | 43%          | 53%                    |
| Chiropractic              | 28%          | 42%                    |
| Aromatherapy              | 27%          | 44%                    |
| Homeopathy                | 23%          | 36%                    |
| Osteopathy                | 18%          | 27%                    |
| Spiritual healing         | 17%          | 24%                    |
| Reflexology               | 11%          | 22%                    |

Among the comments made by the authors were their thoughts regarding the training and practice of certain complementary therapies:

"It is interesting to speculate on the discrepancy between the number of GPs who trained in meditation, hypnosis, herbal medicine and vitamin and mineral therapy and the number who actually practise these therapies. Possible reasons may include GP or patient dissatisfaction with outcomes, poor acceptance by patients, lack of financial reward, or difficulty accommodating more time-consuming therapies in a busy clinic."

In an accompanying editorial, Dr. George T. Lewith of the University of Southampton School of Medicine explained that patients seek out complementary and alternative medicine (CAM) for a variety of reasons. He also stressed a need for further research into all types of complementary therapies.

"Patients may be using CAM largely to empower themselves in the management of their chronic illnesses," Lewith said. "We certainly need to understand more about CAM, why patients choose it, why doctors provide it, and what is it within CAM that seems to be effective."

Increased research, Lewith noted, "may usefully challenge many of our preconceptions about conventional medicine - CAM may have much to teach us about the practice of medicine and the increasing desire for patients to play an active part in the management of their own illness."

### *References*

1. Pirotta MV, Cohen MM, Kotsirilos V, Farish SJ. Complementary therapies: have they become accepted in general practice? *MJA* 2000;172:105-109. Available on line at [www.mja.com.au/public/issues/172\\_03\\_070200/pirotta/pirotta.html](http://www.mja.com.au/public/issues/172_03_070200/pirotta/pirotta.html)
2. Lewith GT. Complementary and alternative medicine: an educational, attitudinal and research challenge. *MJA* 2000;172:102-103. Available on line at [www.mja.com.au/public/issues/172\\_03\\_070200/lewith/lewith.html](http://www.mja.com.au/public/issues/172_03_070200/lewith/lewith.html)

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