

EUROCAM

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

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Executive Summary

From public health to disease prevention, from combating antimicrobial resistance (AMR) to viral and fungal diseases in human and animals, from the health of mothers and newborns, teenagers and adolescents, for health and wellbeing across the life course, from visioning a renewed approach to medical education in Europe to new skills and employment generation to mental health and stress reduction, from providing better and sustainable health and healthcare options in regional, urban and rural Europe to reviving the European way of life and living, Complementary and Integrative Medicine offers some of the most creative solutions. Complementary and Integrative Medicine provides some of the safest approaches for delaying and managing age-related physiological changes and somatic disease and multiple chronic conditions (cardiovascular disease, hypertension, cancer, osteoarthritis, diabetes mellitus, osteoporosis, and numerous chronic conditions) and improving physical function (walking speed, mobility disability, disability in activities of daily living, falls, frailty, continence). Complementary Medicine has much to offer and is the best approach for promoting better health, managing and preventing several conditions. The citizens of Europe, particularly the rapidly increasing number of older citizens, deserve greater engagement and involvement from the European institutions, well-structured funding instruments and international programmes of work, community-level living labs, clinical, basic and fundamental research to realize the citizens' wishes for a healthy life later in life.

The need for healthy ageing

In all EU member states, because of a combination of low fertility and longer life expectancy, the proportion of older people has increased in recent decades and is projected to increase further. That means that if current health policies remain unchanged, the need for healthcare and long-term care can be expected to grow exponentially.

People live longer because the healthcare system has become more proficient at treating infectious diseases and acute episodes. However, the system is challenged by chronic non-communicable diseases and the rising costs of medical treatment not accompanied by corresponding improvements in health. Although people are living longer, chronic diseases are causing illness and disability among those surviving. The best that biomedicine has so far been able to offer is some degree of management of the disease or control of symptoms – sometimes not even that.

We share the vision for healthy ageing formulated in the report 'Healthy Ageing: A Challenge for Europe (Swedish Institute for Public Health, 2007)': "Healthy ageing is the process of optimising opportunities for physical, social and mental health to enable older people to take part in society without discrimination and to enjoy an independent and good quality of life."

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

We will, in this paper, show how Complementary and Integrative Medicine can contribute to longstanding healthy ageing. Both the European citizens and the health budget will benefit.

Definition of Integrative and Complementary Medicine

We would like to start by describing what Integrative Medicine is. This concept is a paradigm shift in the way healthcare is delivered to patients. It is used to indicate a collaborative, multidisciplinary approach that requires applying the best options from different healing systems. Experts from various biomedical and complementary medicine fields combine the systems' diagnostic and therapeutic strengths into a comprehensive and individualised treatment strategy that encourages patient participation.

It has the following characteristics:

- Is patient-centred care and focuses on healing the whole person—mind, body, and spirit in the context of the community.
- Educates and empowers people to be active participants in their own care and to take responsibility for their own health and wellness.
- Integrates the best of biomedicine with a broader understanding of the nature of the illness, healing, and wellness,
- Makes use of all appropriate therapeutic approaches and evidence-based global medical modalities to achieve optimal health and healing
- Encourages partnerships between the provider and patient, supports the individualisation of care, and
- Creates a culture of wellness.

It is necessary to explore this in some detail and outline the role of Integrative Medicine in this transformation.

Complementary Medicine (CM) methods, which are a part of Integrative Medicine, have a common aim, i.e., to restore the patients' natural systems for fighting disease and maintaining health and are therefore highly relevant in chronic disease management.

They

- help reduce the need for high-impact medical interventions and the long-term dependency on conventional prescription drugs.
- help reduce the need for antibiotics, thus reducing the problem of antimicrobial resistance.
- have a high patient satisfaction, increased quality of life, and reduction of absenteeism.
- are mostly low-cost treatments and help reduce the need for high-cost interventions.
- are a safe treatment with hardly any adverse effects.
- have shown to have increasing evidence for its effectiveness and cost-effectiveness.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

Integrative Medicine, therefore, can contribute to the vision mentioned before on health ageing by:

- 1.Improving health maintenance, health literacy, and supporting self-care
- 2.Prevention of illness
- 3.More personally and financially sustainable treatment methods for chronic diseases
- 4.Integration of the services of a large cohort of CM health workers currently operating outside formal health systems
- 5.Retaining of existing healthcare workers in CM holistic approaches to prevention and treatment.

The role of biomedicine and its approach to health and disease

Biomedicine has earned an impressive reputation when it comes to emergency medicine, trauma, the treatment of life-threatening conditions or conditions with irreversible tissue damage, and the possibilities of medical technology – whether the use of miniature robots for surgery, genetic therapies, growing replacement organs and tissues.

However, it has been increasingly acknowledged that biomedicine is failing in some major areas, such as comprehensive patient care and the management of chronic disease conditions. As the burden of chronic illness has grown, so has the dependency on drugs increased. It is the primary therapeutic response of biomedicine to this area of disease management. The biomedical model itself, i.e., counteracting a pathological process with drugs, may lead to long-term dependency on these drugs, including their 'adverse' effects ('adverse' effects are usual but unwanted effects of drugs). Because in biomedicine, every medical condition is seen as a different pathology and needs to be addressed accordingly. There is a substantial risk of polypharmacy, i.e., using multiple medications, especially in the elderly. Over 50% of European care home residents are taking six or more prescribed drugs every day. Polypharmacy is associated with a decline in physical and instrumental activities of daily living, with negative consequences, such as the increased risk of morbidity and mortality. Besides, it pushes up medical costs.

It becomes more and more critical that our healthcare system becomes geared towards a holistic and individualised approach to preventing ill-health with a fundamental focus on maximising health and staying healthy for as long as possible. What is needed is a paradigm shift from focusing on defeating disease to promoting health and preventing or reducing disability. This change would be integral to an enhanced chronic disease management emphasis.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

The upsurge of Complementary Medicine (CM)

A recent study by Kemppainen et al. (2017) demonstrated that in total, 25.9% of the general population in Europe had used CM during the last 12 months. The use of CM varied greatly by country, from 10% in Hungary to almost 40% in Germany. Compared to those in good health, the use of CM was two to fourfold greater among those with health problems.

Since the proportion of older people is likely to grow, one can expect that the future demand for CM by more senior people can increase significantly.

Complementary Medicine refers to those practices that often come from older, cross-cultural perspectives of health and healing. These often focus on lifestyle re-evaluation and the mind/body interaction. In the successful primary and secondary prevention and management of chronic diseases, CM modalities have their most significant contribution. However, they may also support the treatment even in severe illness when combined with biomedicine.

Factors underlying the increased popularity of CM include the rise in prevalence of chronic diseases, an increase in public access to health information worldwide, reduced tolerance for paternalism, an increased sense of entitlement to quality of life, declining faith that scientific breakthroughs will have relevance for the personal management of the disease, increased sense of personal responsibility for health and healthcare, concern about the side effects of ever more potent drugs, and an increased interest and understanding that health involves a positive balance of all aspects of an individual's life from the physical through the mental and emotional to the spiritual.

In the CM model, human beings are considered adaptable, self-regulating, creative biological systems. Illness/disease is a disturbed life process with causes at physical, emotional, social, mental, spiritual levels. Patients themselves take responsibility for their mental and physical health. Treatment involves mobilising and stimulating self-regulating capacity, restoring the balance in the psychosomatic system with the eventual aim: creating and maintaining the health and wellbeing and reinforcing the autonomy and resilience of the patient. Care is individualised, and the responsibility lies with both the health professional and the patient.

CM therapies are not explicitly directed at attacking the symptoms or the primary underlying pathology but reinforcing the resilience, resistance, and immune system, raising the overall health level and pushing back the disease state. Improving the level of health implies reducing the susceptibility to illness and disease and addressing any already existing disease process. As such CM approaches are not limited to simply addressing certain medical conditions but are universally applicable to patients suffering or threatened by all kinds of diseases.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

They can often be used as early first therapeutic options, thus significantly reducing the need for high-impact, high-cost interventions with potential adverse effects and long-term dependency on conventional medication. In the case of infectious diseases CM modalities, by their capacity to boost the immune system, can reduce the need for antibiotics and the problem of antimicrobial resistance.

Central to the CM perspective is the concept of salutogenesis. It describes an approach focusing on factors that support human health and wellbeing rather than factors that cause disease. Salutogenesis explores why some people stay healthy in the face of hazardous influences while others, faced with similar pathogenic factors or other difficulties, fall ill. Thus, the ultimate objective of health promotion is to highlight and facilitate the essential prerequisites for maintaining health. Salutogenesis provides the theoretical foundation of health promotion, including the WHO Ottawa charter, one of the most fundamental documents for the international health promotion movement.

The CM model also has its limitations, notably in severe, life-threatening diseases (sepsis, cancer, etc.). In these critical situations, biomedical interventions are indispensable and should explicitly be given primacy because the protection of life itself always has the highest priority. Sometimes the condition is too far out of balance for the self-regenerating capacity; then biomedical interventions are needed to give the body time to deal with the matter itself: setting up a broken leg, surgery, medication to reduce disruptive or harmful symptoms to a viable or acceptable level and the like. Complementary therapies are then relegated to a secondary complementary role.

The importance of prevention

The first point of call for most citizens concerning their health is when a visit to their GP is necessary for a health concern. Rarely do our health, education, environmental, or social care systems, policies, and programmes promote being and staying as healthy as possible as an ongoing high priority objective in life. The current primary care system has yet insufficient focus on prevention through encouraging healthy lifestyles in citizens. Our current funding system generally rewards health professionals for treating an established condition. There are few resources available for GPs, other primary care providers, or CM practitioners to work proactively to prevent the development of chronic diseases in their community in the first place. Almost no resources are provided for the CM practices and practitioners that can offer health education, lifestyle counselling, and preventative help in CM treatments. Given that paying upstream for prevention is far more cost-effective than paying downstream for illness treatment, this approach does not make economic sense.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

Re-orienting primary care to focus on encouraging and supporting citizens being and staying healthy and on prevention requires funding to be directed to health activities, such as basic healthcare education, lifestyle counselling, healthy work-life balance, screening, early diagnosis services, and health promotion. We must move from a merely treatment-oriented framework of public health and a system of medical prevention that encourages passive citizens to one where time, money and effort are invested in citizens being actively engaged staying healthy and preventing disease, i.e., a prevention-focused society in which healthy lifestyles are promoted and sustained.

Prevention to be embedded into all health activities

There is some evidence that brief interventions during consultations with health practitioners can help individuals make changes to high-risk behaviour such as smoking, poor nutrition, excess alcohol consumption, too little physical activity, and encouraging them to take greater self-responsibility for their health. Concerning CM, surveys show that citizens use it for two main reasons: maintaining their health and preventing illness, and individualised care for illness, particularly chronic disease.

Surveys also show that early middle-age citizens regularly use CM when awareness about the need to stay healthy and the onset of chronic illness coincide. Then they are seeking methods to take care of their health positively and sustainably. Surveys of user satisfaction report high levels of satisfaction and a range of benefits beyond the management of specific symptoms to those that promote health literacy and self-responsibility for health and motivate lifestyle change.

Being and staying healthy, chronic disease and lifestyle

Staying healthy is more challenging than avoiding the lifestyle and psychological habits that contribute to and/or cause disease. We exist in a social, cultural, and familial setting and are influenced by our environment. To make the lifestyle and behavioural changes often needed for our state of health, we must pay attention to the many components that go into our choices and decision-making – developing the awareness to know one's human strengths and weaknesses and to understand the impact of one's actions on one's health requires supported self-education. Efforts to change deeply-rooted and often culturally-influenced patterns of behaviours, such as diet, alcohol and tobacco use, and physical inactivity, have successfully engaged the public health system and health professionals.

Staying healthy and preventing disease requires the development of personal self-awareness and personal responsibility in citizens.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

The concept of self-care requires a daily conscious focus on one's physical, mental and emotional state and the ability to take corrective action whenever imbalance is sensed.

An important and essential aid to achieving this awareness lies in being able to consult with health practitioners with an understanding of what lifestyle factors support good health as a guide to understanding the situation and arraying options, rather than as a technical expert expected to 'fix' it.

By their education in methods that aim to support the individual's own in-built homeostatic health maintaining capacities, integrative practitioners are in a unique position to play an essential role in an evolved approach to healthcare in the future. With the aid of lifestyle advice, natural medicines and holistic therapies, and supportive coaching techniques to help the patient's commitment to change, the innate healing capacity of citizens facilitates restoring and maintaining the balance we call health.

Our vision sees biomedical and CM practitioners functioning together within a systemically coordinated, interdisciplinary, holistic, and client-centred model of care in a healthcare system that delivers an expanded repertoire of treatments that not only focuses on treating disease more holistically but at the same time actively promotes the health and wellbeing of individuals and thereby society as a whole.

CM practice and EU Public Health policy

Complementary Medicine straddles the gap between prevention through lifestyle modifications and the management and treatment interventions of biomedicine. If lifestyle modifications, health psychology and/or mind-body techniques alone are not sufficient to restore health, whole systems of Complementary Medicine (complete systems of assessment and treatment) such as acupuncture, homeopathy, anthroposophic medicine, herbal medicine or naturopathic medicine are especially appropriate first options to support and induce the self-regenerating process of the person.

For CM professionals, there is an apparent synergy between the underlying values and the practice objectives of the various CM modalities and the three strategic objectives of the EU's current health strategy: fostering good health in an ageing Europe, protecting citizens from health threats, and supporting dynamic health systems and new technologies.

As all members of a society increasingly use CM to address their chronic care needs, the corresponding role of public health to monitor and guide what may be perceived as an inevitable shift towards integrative healthcare becomes increasingly essential.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

Public health practice could play a pivotal role in enhancing chronic disease management by integrating and aiding the common goals shared between primary healthcare and Complementary Medicine. In an integrative approach, the most appropriate complementary treatments, conventional biomedical treatments, or both, are employed to address patients and their diseases from the most holistic perspective. The strength of an integrative approach is, through such integration, the limitations of one mode of care may potentially be offset by also using others.

Need for fundamental changes in the delivery of healthcare services

To improve health maintenance and chronic disease management, fundamental changes in the organization and delivery of healthcare services are needed.

There is potential to do so through enhanced cooperation and collaboration between public health, primary healthcare and CM, so that integration of services may be achieved. Integrative health services aim to enhance healthcare equity wherein all individuals may have access to a full range and combination of healthcare services that can contribute to healthy living, reduced sickness and increase health-related quality of life. Achieve this requires a healthcare system that enables and supports a quest for optimal health.

According to the holistic model, all illness has underlying emotional components that predispose one toward specific diseases. Evidence is accumulating that attitudes, stress, feelings of hopelessness, anger, and loss of control all influence our health, our behaviours, and our ability to cope with illness and the frailties of ageing. This field is beginning to generate data that provide the rationale for some of these self-care techniques, especially relaxation and group support, physical exercise adapted to the biographic situation, promoting creativity and positivism with arts, etc.

Evidence suggests that stress impairs the immune response, protecting against cancer, infections, and autoimmune diseases. The incidence of these illnesses increases as we age. Engaging in some form of stress reduction may be protective and may enhance our sense of control even when confronted by physical limitations. Many of these complementary practices, when done consistently, become life-affirming and empowering, no matter what the state of health or age.

Older people are frequently undergoing life changes that make them more vulnerable to the effects of uncontrollable stress-immune system depression, psychological depression, and an increase in chronic illness. Stress-reduction and self-care strategies provide opportunities for choice and control that positively affect older people's health and wellbeing.

Complementary and Integrative Medicine: The Greenest Approach for Health and Wellbeing of Ageing Citizens of Europe

Conclusion

Healthy Ageing requires a focus on societal health education, healthy lifestyles, and a reorientation of our existing primary care system. Current gaps in healthcare service provision should be addressed by extending the system to include the concept of salutogenesis and the holistic approach of Integrative Medicine, with the integration of Complementary Medicine methods. Integrative Medicine's twin objectives of maintaining health and treating illness in an individualised way, where the focus is on salutogenesis, and sustainable and safe treatment of disease, are inherently geared to supporting healthy active longevity, maintaining good health, and strengthening health for resistance to health threats.

This development will require the assistance of professionals to help them make appropriate lifestyle choices, learn self-care, and choose wisely when seeking professional help. Health psychologists, dual-trained physicians (in conventional biomedicine and CM), CM practitioners, specialised nurse practitioners, bodywork practitioners, nutritionists, mind-body technique instructors, and health coaches are examples of categories of workers who may help to fill existing needs. It is likely to lead to safer, more effective, cost-effective, and affordable health delivery systems.