

CAM Practitioners and Research Involvement: Personal Experiences, Success Stories.

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Why Do Research?

- ✦ In clinical practice, CAM practitioners encounter results that provide insight and clues to treating symptoms and diseases
 - ⇒ practitioners wanting to inform the community and other practitioners of such experiences.
- ✦ Call from medical profession and media to produce evidence for therapeutic claims.
- ✦ Research involvement can also be an excellent complement to clinical practice
 - provides a reflexivity that is beneficial to patient care

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Why Do CAM Practitioners Find It Hard To Do Research?

- ✦ There is often a lack of research training in CAM education.
- ✦ CAM practitioners can face isolation in their research ventures
 - difficult to locate a colleague able to share and critique research ideas
 - more difficult to find a colleague qualified to conduct collaborative projects.

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Getting Started in Research

- ✦ The majority of delegates at this conference are practitioners who are keen to conduct research.
- ✦ But perceive a stumbling block ... where to start?
- ✦ Undertaking further study or attending conference workshops are options; alternatively can collaborate with academics/researchers.
- ✦ Collaborating with academics/researchers is not that hard!

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Case studies

- 1) Nicole - an acupuncturist and midwife who was working full-time in a hospital.
- 2) Usha - a GP who was working part-time as a GP and part-time as a lecturer.
- 3) Inger - a chiropractor who was running a large chiropractic clinic and studying part-time.

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Case Study 1:

Hope-Allan N, Adams J, Sibbritt D, Tracy S.

The use of acupuncture in maternity care: a pilot study evaluating the acupuncture service in an Australian hospital antenatal clinic.

Complementary Therapies in Nursing and Midwifery 2004; 10: 229-232.

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- ✦ Nicole was a midwife/acupuncturist who convinced the Area Health Service to allow her to operate an onsite acupuncture clinic for women attending an antenatal clinic at an Australian public hospital.
- ✦ Funding was only obtained for 6 months, so she wanted to gather evidence to support an application for continuation of the acupuncture clinic.

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- ✦ She constructed a questionnaire and gave it to the women attending the clinic (37 out of 51 responded).
- ✦ However, she did not know how to analyse and interpret the data.
- ✦ She contacted us for help.
- ✦ We analysed the data, helped her interpret the results, and were also able to help her write a journal article and publish it.

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- ✦ 49% had previously used one or more CAMs (most frequently used being acupuncture, massage, and naturopathy).
- ✦ Acupuncture produced significant improvement (100%) in self-reported well-being during pregnancy.
- ✦ Working women reported that acupuncture decreased their work absenteeism.
- ✦ All participants stated that they would use the acupuncture service again if they became pregnant in the future.

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Case Study 2:

Usha Parvathy, David Sibbritt, Jon Adams

The use of herbal medicines for the treatment of menopausal symptoms: a pilot study of women attending general practice.

Australian Family Physician 2004; 33(11):955-957.

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- ✦ Usha was working part-time as a GP and part-time as a lecturer.
- ✦ She was interested in knowing whether her patients were taking alternative medicines for treatment of their menopause symptoms.
- ✦ She contacted us.
- ✦ Together we obtained a small grant from HMRI to undertake a study.

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- ✦ The study sample constituted 100 female patients visiting 3 GP clinics in Newcastle - all part of a group of clinics (represented a range of SES locations).
- ✦ Together we developed a questionnaire.
- ✦ All female patients in the 45-65 years age group were invited by reception staff to complete a questionnaire (over a 4 month period)
- ✦ We helped with the design, analysis and interpretation and then produced a journal article.

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- ✦ HM were used by 21 women for menopausal symptoms, including: irregular periods (14%); hot flushes (43%); dry vagina (19%); other conditions (tiredness, mood swings, and sore breasts, 57%).
- ✦ The most popular types of HM were black cohosh (35%), soya products (24%), red clover, vitex and Dong Quai (each 12%).
- ✦ The main reasons for their use were: HM are natural products (59%); fear of breast cancer associated with use of HRT (35%); no side effects (12%); and that HM was recommended by their GP (12%).

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Case Study 3:

Profile of the Chiropractic Patient Population in Newcastle.

Student: Inger Villadsen

Degree: M.Sc (Clinical Epidemiology)

Supervisors: Jon Adams, David Sibbritt

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- ✦ Inger wanted to learn research skills and so undertook a Masters degree.
- ✦ She wanted to conduct a research project around chiropractic practices.
- ✦ We became her supervisors.
- ✦ Her research was motivated by the lack of descriptive data of the chiropractic patient population in Australia.

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- ✦ Cross-sectional survey of 300 patients from chiropractic clinics in the Newcastle area, using a validated questionnaire.
- ✦ All 26 chiropractic clinics in the Newcastle area were approached to participate in the survey – 19 clinics participated.
- ✦ 20 patients per clinic were sampled from each clinic – each patient/chiropractor was given a questionnaire.

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- ✦ Inger produced a Minor Thesis
- ✦ Obtained valuable information:
 - describe the demographic/health characteristics of the chiropractic patient population in Newcastle
 - establish the point prevalence of CLBP patients in chiropractic practice
 - outline the nature of presenting complaint/diagnosis
 - describe patient satisfaction/dissatisfaction with chiropractic treatment
 - compare CLBP and non CLBP chiropractic patient's health status on a range of measures.

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Conclusion

- ✦ All the people had different motives for conducting research.
- ✦ But a simple email/phone call put them in contact with researchers who could not only teach them vital research skills but also help them produce published work.
 - the researchers learnt a thing or two as well!

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- ✦ As academics, we are used to working with people who can dedicate a reasonable amount of time to projects.
- ✦ However, practitioners cannot dedicate a major part of their lives to study/research → they have their practice to worry about!
- ✦ University academics/researchers have to be flexible with their expectations.

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- ✦ Collaboration between academic researcher and CAM practitioner benefits both parties
 - CAM practitioner provides and shares insight relating to aspects of clinical practice.
 - academic researcher applies and shares their expertise in methodology and design.

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- ✦ Some of the research performed by CAM therapists lacks scientific rigour.
- ✦ But research performed by experienced researchers may not accurately evaluate the treatments because of lack of knowledge.
 - eg. Echinacea for acute colds/flu
- ✦ It is important for researchers to have contact with practitioners.

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Need Help?

Contact NORPHCAM!

www.norphcam.org

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