

**The Editor,  
Clinical Medicine  
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London NW1 4LE  
04/07/2010**

Sir,

Allen's editorial "*Complementary and alternative medicine a conundrum*"<sup>1</sup> declares that the RCPs' position on the statutory regulation (SR) of herbalists and acupuncturists is "crystal clear", maintaining that conferring SR on such practices gives them "a spurious scientific reliability and respectability".

Despite his assertion, there appears to be significant disagreement within the RCP about this hardline stance. Since 2001, the RCP's Integrated Health Committee (IHC) has been chaired by eminent Fellows including Dame Carol Black, Professor Roy Pounder, Dr Mary Armitage and Dr Mike Cheshire. Attendees included Sir Richard Thompson, currently RCP President. Throughout nine years, the consensus of the IHC remained firmly in favour of SR of acupuncturists and herbalists recognising this to be in the public interest given the widespread use by the public of these therapies. The RCP backed the SR of herbalists and acupuncturists in the first DH public consultation in 2004. In 2008 Sir Ian Gilmore, as President, wrote to the Health Minister urging swift action on this matter.

In response to another DH public consultation on the same subject in 2009, the IHC recommended that the RCP Council should back SR on the understanding that practice should be based on evidence-based medicine as defined by Sackett<sup>2</sup>, recommending that practitioners should be trained in conventional medicine and pharmacology.

The RCP Council, apparently influenced by opponents of such regulation, ignored the advice of its IHC and reversed almost a decade of RCP support for this SR. The RCP's *volte face* characterises SR as a badge of rank and efficacy. However, the primary function of SR is public protection, assuring standards and removing failing individuals from the register.

The economist Milton Friedman famously highlighted the self interest of the medical establishment in limiting entry into medicine.<sup>3</sup> It is fair to ask if the recent RCP stance against the SR of herbalists and acupuncturists is another example of this latent tendency. As such it should be ignored by the Government which, in the public interest, should introduce the SR of this sector without further delay.

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<sup>1</sup> Allen R. *Clinical Medicine* 2010 Vol. 10 No 3 211-12

<sup>2</sup> Sackett, D., Rosenberg, W., Muir Gray, J., Brian Haynes, R., Scott Richardson W. (1996) Evidence based medicine: what it is and what it isn't. *British Medical Journal*, 312, 71-72.

<sup>3</sup> Friedman M, Kuznets S. *Income from Independent Professional Practice*, New York, NBER 1945 & Friedman M, *Capitalism and Freedom*, Chicago, University of Chicago Press, 1962.

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