

**Medical Board of Australia: Public consultation on clearer regulation of medical practitioners  
who provide complementary and unconventional medicine and emerging treatments  
Submission by [REDACTED]**

Thank you for the opportunity to provide feedback on this paper.

I have received complementary and unconventional medicine and have experienced relief and helpful response to my condition in the framework of detailed attention to my condition, ultimately diagnosed as Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) for which there is no cure. Based on my experience with these practices I submit that Option one should be retained.

**Option one** – Retain the status quo of providing general guidance about the Board’s expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board’s approved code of conduct.

My comments apply to complementary and unconventional medicine. The paper bundles together various areas which involve quite different treatments, eg the administration of micronutrients does not involve the same issues as stem cell therapy or performance enhancing treatments. My comments do not apply to the latter-mentioned treatments of which I have no experience. These areas might be better addressed separately rather than in a bundle as is done in the paper.

I prefer the term ‘integrative medicine’. It reflects more fairly the broader scope of the practices referred to in this paper as complementary and unconventional medicine. ‘Unconventional medicine’ has pejorative overtones. Definition of terms as ‘Not generally considered part of conventional medicine’ is an overly broad and flexible definition which may be temporary and changeable, being subject to new evidence, new diagnostic technology or acknowledging evidence which is currently being ignored.

**Reasons:**

It is unclear why this paper has been issued at this time. The proposal states that feedback has been received from stakeholders, raising ‘Concerns about therapies and treatments being offered’ and seeking additional guidance for medical practitioners in relation to the practice of ‘complementary and alternative medicine’. Who are the stakeholders expressing these concerns? They remain unnamed and so the paper lacks transparency as to the source of concerns.

That 'The harm can be physical, psychological and/or financial.' is a general claim. The paper does not provide evidence of egregious numbers or types of complaints or claims of harm as a result of complementary and unconventional practices. It does not provide a comparison with the numbers and types of complaints about conventional medical practice and so there is no grounds for concluding that there is a higher rate of complaints or harms as a result of these practices than for conventional medicine.

Tribunal decision are quoted for unconventional medicine cases but there is no equivalent list of examples for poor practice in conventional medicine where problems also occur. Evidence of harms has been found in conventional medicine, eg, breast implants and tardiness in addressing the problems caused. The 'use of surgical mesh for stress urinary incontinence was 'accepted', yet caused some disasters for patients and was suspended. Some supposedly evidence-based medications have had to be withdrawn after harming patients.

The claim of 'Providing a person with health services of a kind that are excessive, unnecessary or otherwise not reasonably required for the person's wellbeing' has not been substantiated. Provision of services are a matter of practitioner judgement and similar issues can arise in conventional medicine. Nutritional treatments often seem to be considered unnecessary by conventional medicine. However, this belief is often based on the assumption that a patient's nutritional status is normal, in the absence of actual testing. Treatments in conventional or unconventional medicine can be effective even in the absence of having been accepted by conventional medicine.

The proposal has not made the case that complementary medicine presents greater risk or harm to patients than does conventional medicine.

The paper expresses much concern about the financial costs of unconventional treatments. However, cost- effectiveness is not considered. The costs of integrative medicine may be higher because appointments maybe much longer than those provided in conventional medicine. Longer appointments allow the patients' condition to be explored in detail with a holistic approach and allow greater opportunity for a diagnosis and treatment plan to be arrived at. In conventional medicine patients may visit several specialists fruitlessly, increasing costs without any beneficial effect because they fall between the cracks of specialties and there is no holistic overview of their condition. The costs of conventional medicine visits may not be evident to patients due to Medicare coverage which may not be provided for integrative services. Treatments are also often not available on the PBS. It is unfair to portray these costs as exploitation of patients. Further, it is for patients to decide if they are able/willing to expend the extra funds.

The paper notes that 'complementary and unconventional medicine and emerging treatments is increasing'. Has the Medical Board considered why this increase is occurring? It might usefully address this question, instead of seeking to make practice in these areas more difficult.

The board needs to consider that practitioners of complementary and unconventional medicine often treat conditions which are undiagnosed, dismissed and abandoned by conventional medicine. Patients then often turn to complementary and unconventional medicine where they are taken seriously and are often offered some relief.

An example of such a condition is ME/CFS\*, which has largely fallen outside the purview of conventional medicine. Due to the lack of a diagnostic test, ME/CFS patients are frequently subject to missed, incorrect, or delayed diagnosis. According to a survey by community group Emerge, 40% of patients took at least 3 years to be diagnosed and 44% rated their GP's level of knowledge about the condition as poor. It appears acceptable for doctors to say, 'I don't believe in this condition' while being unaware of the scientific evidence of abnormalities. There is no specialty to which the patients can be referred and they may be inappropriately referred for psychiatric treatment.

The consultation paper is concerned that treatments without an acceptable evidence base are provided by unconventional practices, implying that all treatments of conventional medicine are perfectly evidence based. Yet, to the extent that any treatment is offered to ME/CFS patients, this is likely to be Cognitive Behaviour Therapy and/or Graded Exercise Therapy (CBT/GET). This occurs in spite of the poor evidence base for these treatments; that these treatments have been discredited; that they are mostly ineffective and can lead to long-term harm to the extent of patients becoming bedridden.

According to para 4.2.1 of the Guidelines, the complementary doctor may advise the patient that the 'investigation and treatment is consistent with conventional medicine and accepted by the medical profession'. CBT and GET are indeed accepted by the conventional medical profession, yet they are precisely the treatments which can be harmful for ME/CFS patients.

In spite of having been advised of the poor evidence base of the trials of CBT/GET, the RACGP website still recommends them. The general neglect of the condition and use of harmful treatment may drive patients to despair and the risk of suicide.

The consultation paper suggests that the issue of informed consent to treatments is especially problematic in complementary and unconventional medicine. Yet, ME/CFS patients are generally not given full information about the ineffectiveness or risk of harm of CBT/GET and their consent is not sought. Usually, doctors themselves are not aware of the adverse effects. When ME/CFS patients are informed of, or experience the adverse effects of these treatments, patients generally reject them. Adverse effects are not officially recorded and are left unrecognized or misinterpreted. Conventional medicine has not shown itself to be superior in this area of concern.

\*(ME/CFS is estimated to affect over 200,000 Australians (ie 8 times more than Multiple Sclerosis), with 25% permanently unable to leave their bed or their house. These patients have almost no access to trained doctors, treatments or support. I can provide references on issues of ME/CFS upon request.)

Lyme disease (in patients who have not been outside Australia) is cited as an example of diagnoses which are not generally accepted as part of conventional medicine' and protocols such as long-term antibiotics for Lyme-like illness are rejected. This represents a dogmatic approach to an area where research has been neglected and so evidence acceptable to conventional medicine is missing, leading to a climate of disbelief, in spite of patients showing the signs of being very ill and disabled.

Prof Peter Irwin, who is embarking on a study of Lyme disease (DSCATT) states, 'what is terribly important is that Australian ticks are full of bacteria and microbes, but there is still a question as to whether any of these could be the cause or causes of DSCATT'. In view of the apparent effectiveness of antibiotic treatment for some very ill patients it appears unjust that doctors who provide this treatment are penalised because the condition is considered outside the scope of conventional medicine. Meanwhile, conventional medicine frequently offers no help and no treatment to these patients. Is it the preferred option to let patients suffer and die as has happened, while their doctors are subjected to restrictions for administering a possibly effective treatment?

While the consultation paper proposes restrictive measures on practitioners of complementary and unconventional medicine, it proposes no solutions or helpful treatments for the conditions to which these practitioners often apply themselves. The aim seems to be the preservation of conventional dogma, which in any case may change in the future. Complementary treatments should be made easier for patients rather than casting more obstacles in their way.

It is generally agreed that all regulation should have at its centre the need and protection of patients, who should be safe and not be given false expectations. However, patients with some conditions at present fall between the cracks of conventional medical specialties. The holistic approach of integrative medicine fills some of the unmet need. Complementary/integrative medicine should be recognized and regulated as a medical specialty in its own right, just as all specialties are.

The statement of assessment B states that the proposal will not restrict competition as it would apply to all registered medical practitioners. Why then are the additional proposed standards aimed only at complementary and unconventional medicine and emerging treatments? To the extent that any new standards are implemented they should apply to all medical practitioners.

The proposed regulations would impose additional burdens and costs on integrative doctors. They would create a deterrent for doctors to practice in this area and impose more severe penalties on doctors already practicing. They would rebound on patients quite severely since integrative doctors attend to conditions which are already neglected and abandoned by the current framework of conventional medicine. They would not only restrict patient choice but prevent patients from accessing the only care which has benefits for them, leaving some with no care at all and in a desperate position. Has the Medical Board considered this consequence of its proposals?

**Conclusion:**

The paper has not made the case for strengthening the current guidance for complementary medicine and unconventional practices and the paper fails to provide evidence for the dangers, risks or harms which it claims these treatments have led to. Option 2 would lead to discriminatory regulation and to adverse consequences for doctors and patients. It would appear that 'Good medical practice: a code of conduct for Australia' already covers the most important issues raised in this paper. It should continue to apply. I recommend Option 1.

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**From:** [REDACTED]  
**Sent:** Friday, 12 April 2019 7:27 AM  
**To:** medboardconsultation  
**Subject:** 'Consultation on complementary and unconventional medicine and emerging treatments'

Dear Sir/Madam

As a user of complementary medicines to treat Pyroluria ( that I have had all my life but was officially diagnosed in 2010).As this is the only treatment that has had any positive effect, I submit my objection to the new guidelines for the following reasons

- The grouping of integrative medicine with 'unconventional medicine' and 'emerging treatments' may create the impression of being "fringe" rather than evidence-based
- That many of the terms used in the rationale such as 'unconventional medicine', 'inappropriate use' and 'emerging treatments' leads to ambiguity and uncertainty
- That the term 'complementary medicine' also includes access to traditional medicines
- No evidence produced in the discussion paper quantifies risk in practicing complementary or integrative medicine vs 'conventional' medicine
- That there was NO consultation with the Integrative Medicine or complementary medicine community before the document's release
- That the current Good Medical Practice: A Code of Conduct for Doctors in Australia already adequately regulates doctors' practise and protects patient safety. There is no need or justification for a two-tiered approach
- That the right of patients to determine their own medical care is under threat
- That the lack of clarity on how to determine what is 'conventional' versus 'unconventional' can be misused by people with professional differences of opinion which results in troublesome complaints.

If you require any further information, please contact me.

Kind regards

[REDACTED]

The Medical Board of Australia

G.P.O Box 9958

Melbourne, Vic 3001


29 March 2019

Potential Changes to Patients Choices

Dear Medical Board

I wish to express my deep concerns regarding your recent published intentions the Medical Board of Australia is considering options for 'clearer regulation of medical practitioners who provide complementary or unconventional medicine or emerging treatments outside of the normal conservative paradigm.'

I am an Australian citizen, in approximately 2012 I became quite ill, I visited numerous doctors with no diagnosis. I was treated very badly by some GP's with them saying 'it was all in my head' and was written off as a patient. In 2018 I became very ill it was affecting my mental health with depression and anxiety. I could hardly get around by myself because of the physical effects on my body. I finally found a doctor who diagnosed me with Lyme Disease. Blood tests were sent also to Germany. I had multiple blood infections and was likely to die if untreated.

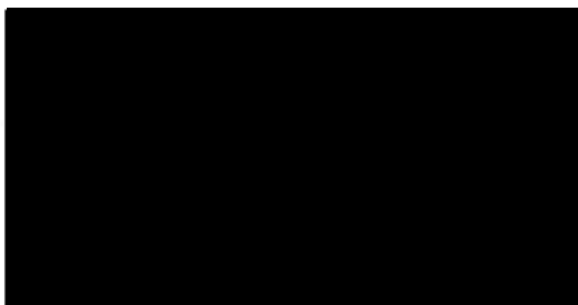
I have  now been treated with long term antibiotics and can control and manage my disease with supplements such as vitamins, herbal medicine, and homeopathy that is considered by the board to be unconventional and alternative therapy.

As an Australian citizen and a human being I believe I have the right to be able to have the freedom of choice in the matter of my health, diagnosis and treatments. To be able to access the best medical treatment possible regardless of whether the board feels this is unconventional therapy or not.

Times have changed, people are more aware, educated and seeking alternatives to the current regime and protocols. The Medical Board should be embracing new and different ways of patient care, particularly regarding Lyme's Disease.

I urge the board to give Medical Practitioners the support to give patient diagnosis and care using alternative treatments that patients are seeking.

Yours faithfully



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**From:** [REDACTED]  
**Sent:** Thursday, 27 June 2019 7:23 PM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

To whom it may concern.

I have had ME/CFS for the past 20 years and over the last 18 months my symptoms have progressed and I have had a 50% decline in my ability to function. I am unable to work and have reduced the amount of time I can spend doing daily activities.

Some might call me lucky as I make it out of bed every day, others feel sorry for me as my dream career is slowly disappearing and every day I struggle with exhaustion.

The financial loss of my income has also been difficult as treatments are expensive and I have two children to care for.

I have seen many Doctors over the last 18 months and discovered that most of them don't know what to do with my health or how to investigate and treat my symptoms.

After 5 months of declining health I found a medical centre that's focus was treating people with Myalgic Encephalomyelitis. They prescribed me Naltrexone in low doses, pulsed Antibiotics and slow K for channelopathy. I was encouraged to continue to see a naturopath for vitamins and supplements support.

With the above treatments I started to feel better and over the next few weeks my symptoms stabilised. I started to function enough to be a part of my children's life and attend a few social outings. I now spend most of the week out of bed during the day, manage to take the kids to and from school/kinder and can manage to clean the house.

When I have attempted to reduce or stop the medication listed above I have increased pain, struggle to keep up with daily tasks, my heart flutters and I become dizzy. I become extremely exhausted, sensitive to noise and find that after concentrating for prolonged periods of time I must close my eyes, lie down and be still. I lose the little quality of life I have.

If there are changes to the guidelines I am scared that I will be unable to seek and access appropriate medications that I have found to be extremely effective.

At this point in my illness I spend a lot of time researching treatments including unconventional off label medication, vitamins, supplements, injections and infusions.

I believe that I deserve the right to choose to use medications that have positive effects on my health and that the existing guidelines provide sufficient protection.

Regards

[REDACTED]

[REDACTED]

[REDACTED]



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**From:** [REDACTED]  
**Sent:** Tuesday, 25 June 2019 3:37 PM  
**To:** medboardconsultation  
**Subject:** ME/CFS submission

Good afternoon Medical Board,

I am a person with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS), for the last 20 years.

While there are no actual treatments for this condition, it is important to allow my doctors to have the freedom to assist me based on their expertise and my needs, and I do not want unnecessary restraints placed on the way my health is managed.

Therefore I support Option 1.

I also note there is very little research being done in this area (which is disappointing), given it affects several hundred thousands of Australians, and can be a very debilitating condition.

Thank you for considering my view and perspective from a person with a lived experience,

Yours sincerely,

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Saturday, 30 March 2019 3:21 PM  
**To:** medboardconsultation  
**Cc:** [REDACTED]  
**Subject:** "Consultation on complementary and unconventional medicine and emerging treatments."

Dear Sir/Madam

I am a 55 year old female who went to her GP approximately 10 years ago with fatigue issues and a foggy/tired disposition most days. With children at home I found being tired very frustrating. My usual GP organized blood tests and advised me that everything was with range and there wasn't much I could do except eat well, exercise and get good sleep. Great advice but I had already been doing those things.

I spoke to a friend about this and she advised me to go and see an integrative Medical Doctor she went to. On visiting this Doctor and having a long consultation to gain my medical & family history some more thorough blood tests I was put on some compounding medication and could not believe the difference in my energy levels and sleep at night. The women in my family have all previously experienced troublesome symptoms with menopause and with the help of my Integrative Medical Doctor's knowledge and the correct medication and supplements I have avoided this.

My 18 year old son has recently visited the Integrative Medical Doctor after having a mystery illness for 3 months now, the local Doctor tried to help and organized some tests but the Integrative Doctor has looked at a lot more possibilities and now once again with all the information, appropriate medication and supplements my son is feeling considerably better.

Please do not take away our (the Patients) ability and right to go to other Medical Providers.

The quality of care by my integrative health provider is second to none. Everything we discuss is well documented and all my results are explained in full, we also use previous results to show improvement or areas that still require treatment or tweaking for the betterment of my health. I have experienced side effects with any treatment but we have changed some treatments/medication for a better result.

Regards [REDACTED]

26<sup>th</sup> March, 2019

The Executive Officer  
Medical  
AHPRA  
GPO Box 9958  
Melbourne 3001

Dear Sir/Madam,

**Re: Consultation on Complementary and Unconventional Medicine and Emerging Treatments**

Thank god for my daughter's general practitioner that understood she was very unwell, spent time talking about her symptoms, her life and how she was coping and explored solutions and treatments with her, often experimental. Thank god for my daughter's general practitioner that pursued many paths of diagnosis to ultimately diagnose Lyme disease, tick borne disease or DSCATT (debilitating symptom complexes attributed to ticks, the new name post the Senate Inquiry) or whatever we are now meant to call her disease! The name is irrelevant. It was an enormous relief to find this professional, caring and motivated GP after seeing 13 medical specialists who tried to help my daughter with no success and varying levels of compassion – often poor.

My daughter had plans. She wanted to finish school. She wanted to go to university to study vet science. She may have followed her childhood dream to work with large cats in Africa. She would have continued to have a large circle of good friends. She would have become a young and confident woman keen to contribute to life and society.

Incredibly, because of the care, support and partnership with her GP she has achieved being a young and confident (and unwell) woman contributing to life and society.

I am the mother of a young woman who has spent most of the last 10 years house bound, unable to complete her schooling and has missed many formative life experiences because she has been so unwell with a disease caused by proven bacterial infections (Borreliosis, Bartonella and Rickettsia) that laid untreated for over 6 years. The infection has been documented in testing in both Australia and the US. No specialist conducted these tests and instead headed off in other directions using other treatments and strategies to no effect.

Currently the main symptoms that my daughter experiences are: constant fatigue, cognitive impairment (brain fog, memory loss etc), impaired physical exertion (unable to walk more than 100 meters without great difficulty), severe chronic headache, nerve pain/muscle pain across her body, postural hypotension, dizziness, loss of vision, palpitations, shortness of breath (with no exertion), constant severe nausea, sweats and chills, and a worsening of

symptoms with her menstrual cycle. Once you read about Lyme disease in Europe and the US – her symptoms are classic for Lyme disease.

Lyme was a surprise diagnosis. Firstly, it had not been previously raised and secondly my daughter was not aware of being bitten by a tick. However, the relief to finally have a diagnosis that made sense was enormous for my daughter and our family. My daughter had previously travelled to Asia and Africa several years before she started to become unwell. In the year prior to becoming unwell she had worked as a volunteer at Taronga Zoo and had undertaken Duke of Edinburgh bush expeditions as well as a school 6-day camping trip in the bush south of Canberra.

We do not know where she was bitten but this seems a less important than the anger at her not getting an early diagnosis and treatment which might have resulted in an immediate cure.

Instead there has been an enormous amount of waste – a large part of my daughter's life, family resources and healthcare resources. Until we met her current GP who has made progress in his treatment over the last 4 years.

We need better awareness of Lyme Disease in the medical profession. We need better testing of the disease; we need more research on how to treat chronic Lyme disease. We need more compassion for the current sufferers of the disease, and we need more support for the doctors trying to help these very unwell patients.

We do not need more restrictions on the doctors trying to help. We do not need further disrespect by the medical profession for Lyme disease patients. We need as many options available as possible and the opportunity for my daughter to participate with her GP in the decisions to explore treatment options.

I need my daughter to get well, re establish friendships that have ended with a lack of understanding of her disease and for our family to get back a girl who can chose to pursue her childhood dreams!

Option 1 is required to give wonderful caring GPs as many options as possible working with their patients and not being told what is allowable or not.

Yours sincerely

[Redacted Signature]

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**From:** [REDACTED]  
**Sent:** Thursday, 11 April 2019 7:14 PM  
**To:** medboardconsultation  
**Subject:** Option 1

Keep complementary medicine and the current rules/regulations. No changes needed unless your going to get Medicare and more rebates on board.  
Complementary medicine has been the ONLY help for my daughter and my health. It's been costly but so worth it. Complementary medicine needs more help not less by restricting it even more.  
Please call or email if you have any questions  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 10:31 PM  
**To:** medboardconsultation  
**Subject:** Proposed changes to Intergrative health regulations

Hello

I am writing regarding the proposed changes to regulations governing Intergrative midicine in Australia.

Traditional medicine was very little help to me during years of chronic illness. Only intergrative medicine has been able to help and improve my condition.

I ask that you don't do anything that will increase the cost or access to this form of care. It is valuable and a last hope for many people.

Sincerely

[REDACTED]  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Monday, 24 June 2019 8:06 PM  
**To:** medboardconsultation  
**Cc:** [REDACTED]  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

To the Medical Board of Australia

Public Consultation on Complementary and Unconventional Medicine and Emerging Treatments

My feedback to the board is that it should ***retain the status quo***.

These proposed changes appear to be a thinly veiled attempt to curtail complementary cancer treatments.

Australia has a comparatively high per capita cancer rate, but sadly lags well behind many European countries in integrated treatments (according to visiting doctors and medical professionals currently working in our hospitals who already constrain what they would recommend to patients to comply with Australia's strictly conventional approach). It is a backward step and does not represent the best interests of the Australian public.

If this change goes through it risks further **diminishing the trust** that the general public has for the medical profession. It will give the appearance of "being in the pocket of the pharmaceutical companies". Whether that is true or not, it will have that impression.

Does an honest look at the statistics support a change? Are there truly more poor side-effects from complementary medicine than conventional medicine? Is there truly more money being spent on complementary medicine which proves ineffective than money spent on conventional medicine which proves ineffectively?

The interpretation of current regulations is already applied much more harshly to complementary practitioners than conventional. The specialist Oncologist at one of [REDACTED] teaching hospital "guaranteed" my relative would survive 6 months if she had radiotherapy and "guaranteed" that she would be dead in 3 months if she did not. If a complementary practitioner had made these guarantees they would have been stripped of their medical licence but a conventional doctor isn't expected to meet the same standards. (By the way, my relative, in her 80s with other complicating illnesses, decided to just die peacefully and participated in unconventional medicine with the intention of just easing her pain in her last months, and to her surprise she lived another 5 years. Her treating GP would be delisted under your new rules).

Doctors seem well placed to provide treatment to patients seeking complementary medicine because they have the ability to sort out what would be harmful from what would be possibly helpful. They would also know about the drugs that their patients were on and have the knowledge to avoid bad interactions - the non medical therapists that people will go to if your draft changes go through will not have this benefit.

Another relative was just diagnosed with stage 4 bowel cancer with mets in liver and lungs. She has been able to stay on the very strong and effective conventional drugs much longer than patients can usually handle because she is also doing complementary medicine to help her body cope. Her doctor keeps being amazed at how well she looks and how she is able to continue her treatment for so long. Her complementary GP who is enabling her to handle conventional medicine would be delisted under your new rules.

The current rules are enough. I cannot state in strong enough terms how much I would object to the introduction of your proposed changes.

Kind regards,





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**From:** [REDACTED]  
**Sent:** Friday, 5 April 2019 4:55 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

I am a partner in our retail pharmacy in rural Victoria, I am encouraged to write a short submission in response to a request by Mr Marcus Blackmore in respect to the current consultation as named above. Evidently Marcus was requesting that we support Option 1, being to retain the status quo.

However I am writing to fully and vehemently support Option 2. I could recount numerous incidents where we are forced to walk a thin rope in respect to some of our local General Practitioner's practices in relation to "complementary" medication. The GP diagnoses then sells the complimentary medicine within their own practice, without any ability for the patient to have the input of a pharmacist. The most recent case being with a newly diagnosed dementia patient, which was only discovered through conversation with her carer, who themselves were confused as to directions and intent of the "prescribed" anti-oxidants.

It takes a lot of diplomacy to work through such situations, we are very careful not to undermine the doctor's advice and if the medication were cheap we might consider that no harm had been done and leave the matter, though the supplements are most commonly not cheap and despite this we would consider the practice neglectful and substandard in the very least.

We highly encourage Option 2 and look forward to these practices being more stringently addressed.

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Monday, 25 March 2019 5:12 PM  
**To:** medboardconsultation  
**Subject:** Re PUBLIC CONSULTATION ON COMPLIMENTARY MEDICINE AND EMERGING TREATMENTS.Concerned Australian

To the Executive Officer Medical,

As an Australian citizen who has used integrative medicine for over 40 years I can only skim the surface on the help my family have received from integrative Dr's and naturopath including herbalist, Chinese medicine practitioners and osteopath as well as acupuncture.

I will give you a view into my experience and whilst this is my opinion and my personal journey it is the journey of many like minded people who have used integrative medicine in our country.

In 1984 my husband age 26 was diagnosed with high blood pressure. He was given blood pressure lowering drugs and was told by gp he would need for the rest of his life. 2nd opinion by naturopath and herbalist he was given Hawthorn herbal mixture and garlic and under supervision of gp blood pressure taken monthly. Never again has he had elevated blood pressure. Next was in 1986. He was diagnosed with pulmonary alveoli proteinosis. Whilst this can be fatal, at the time there were only 9 people in the world with the condition. His heart lung specialist advised him there was no treatment but to go to hospital if he couldn't breathe and they would "flush his lungs out", I kid you not, these were his exact words.

So we decided to seek treatment elsewhere as my motto is treat the cause and you will find a solution. So a very well respected naturopath tested him for many things. He found he was riddled with toxins from a tobacco farm he had worked on years prior to his diagnosis. So his goal was to detox him whilst treating symptoms on a weekly basis. His condition worsened but eventually saw the other side and although it took 6 months he felt wonderful. 12 months later he ran into lung specialist. Asking him how he was my husband said great. The dr replied I would like to see you again. So we made an appointment. He did tests and xray and told us there was no sign of the disease and whatever we were doing to keep it up. It's not a curable disease. He has never had the disease return. Fast forward to 2003 and my husband was diagnosed with stage 4 small cell follicular non hodkins lymphoma. Dr said there is no cure but we can treat. At the time of diagnosis he had a lump in groin and lots of lymph nodes affected. His dr said I am going on holidays for 6 weeks you can have chemo now or wait til I come back. We opted to wait. In that 6 weeks we had an appointment with an integrative Dr in [REDACTED]. He put my husband on a detox regime and juices. He also needed probiotic and a few vitamins and minerals and herbs. Whilst we have always been proactive in our health this diagnosis was a real shock. His haematologist had given him 3 years maximum to live. So we began on a journey that would continue for another 16 years. (remember he was given 3 years to live) When his haematologist got back from holidays we went for next visit. She did bloods and tests showed you still have cancer but it's smouldering (indolent) and don't need any chemo at the moment. This was the case for next 3 years. We continued with naturopath treatment and every 6 months cancer Dr check up. In 2006 he finally needed chemotherapy and radiation. He still has lymphoma just no treatment needed at the moment.

Whilst our children have been raised using integrative medicine they are now adults who choose to use diet, exercise and integrative medicine.

These are just a few of my stories. There are too many as a family of 5 you can imagine.

My own personal journey I could write a book.

So the basis of me writing this email is so our government NOT take away our choice. We need integrative Dr's, we need herbalists all who have university degrees. Whilst our TGA keep their eye on products consumed by Australians and our FDA our foods consumed I, as an Australian citizen feel safe that Aphra will keep watching out for our dr's be they Chinese medicine or herbalists and naturopaths. Sometimes the general practice does not find a cure or a remedy for our illness as they treat the symptoms, but our naturopath who looks for a cause will keep looking until they find the cause and not shrug their shoulders and say I am sorry I don't know. This has happened to every single member of my family and this is why we went to integrative and use complementary medicine. They both have their place in Australia. We seek to get to the root of disease.

Our basic human civil right is to have choice, not to be treated like a 3rd world country and have chronically ill patients travelling to other countries for treatment just because our government had blinkers on and could not see the right way to go.

PLEASE DONT TAKE AWAY OUR CHOICE!



Wife,mother and grandmother

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**From:** [REDACTED]  
**Sent:** Saturday, 8 June 2019 3:38 PM  
**To:** medboardconsultation  
**Subject:** Request not to limit patients right to choose their healthcare

To whom it may concern

I strongly oppose the imposition of any limitation on the availability of alternatives to conventional medical practice.

Using an integrative medical practice, where both allopathic and naturopathic treatments and advice are offered and combined, I have experienced an enormous improvement in my overall health and in the management of my chronic inflammatory illness. Using the standard allopathic treatments, as I have in the past, has had far less impressive results for me.

I believe that as long as there are alternative treatments, some of which have hundreds if not thousands of years of practice behind them, we as a society should be open to them and allow people to access these options for health care in a properly controlled and monitored environment.

Current research is showing that our standard diet, with its high sugar content, high seed oil content, and preponderance of processed foods and drinks, is probably the major contributor to the diseases of western civilization such as diabetes and heart disease. If you're really concerned to improve medical conditions for people in Australia, why not focus on this life-threatening trend rather than trying to reduce our opportunities to seek help by using alternatives to conventional (and often deadly) allopathic treatments? Or is our medical profession too much in thrall to the drug companies pushing their products which are very often aimed at fixing the symptoms rather than solving the underlying problem of our mitochondria being damaged by our diet?

Yours very sincerely

[REDACTED]

## SUBMISSION

**To :** Medical Board of Australia :  
**Public consultation on complementary and unconventional medicine and emerging treatments**

**From :** [REDACTED]

**Date :** 15 June 2019.

.....

### Background :

My name is [REDACTED], Age 59 years, and I have been diagnosed with a complex and chronic rare disorder (MINGE).

I have been unwell all my life, but became acutely unwell in 1997. It felt like I had hit a brick wall and could no longer "push through" to reasonable good health.

My long term health challenges are many and include the following :-

- Huge energy deficits affecting voluntary muscles and involuntary muscles
- Specific muscular weaknesses
- Chronic Fatigue Syndrome
- Total Gut Inertia
- Epilepsy
- Multiple Chemical Sensitivity, including induced seizure response
- Artery and Venous anomalies to right side of body
- Multiple mini strokes
- Fibromyalgia
- Pain Syndrome ( includes muscle, nerve, bone and especially gut)
- Emaciation and Malabsorption Syndrome – maximum weight achieved is 37Kgs over last 3 years



Prior to finding an integrated health practitioner, I sought out the help of many local GP's and doctors in the regular public health system. Unfortunately I often found that these providers would not believe my symptoms that I described and sought help for.

I was told, despite a scan showing no motility in my large bowel, that I was "attention seeking". I was told to "pull up my socks and stop being so dramatic". This was when I was too weak and too tired to sit up and eat a proper meal. Another time when I was too weak to get out of bed and walk down the hallway, a psychiatrist verbally abused me including telling me to "get out of bed, do a pooh, and go home and be a wife and mother".

I was humiliated and felt discarded when I was at my most vulnerable. Further to this, I was not only verbally abused, emotionally abused, and psychologically scarred, but I was also physically abused three times whilst under the "care" of these physicians.

The above are substantial evidences of medical abuse syndrome. Additional instances are as follows :-

- GP's refused to treat me – so I received no treatment, or interest in my poor health
- I was threatened with being "scheduled" if I did not co operate with the GP's instructions. All this because I considered these requests were not in my best medical interest. This caused me to be terrified and forced my compliance, in spite of my rights allowing otherwise.
- Often GP's would not admit that they did not know what was medically wrong with me. This enabled the GP's to exercise aggression and power play with me.
- Interrogation by a mental health care team visiting my home, deemed me cognitively well and of sound mind but never offered any actual service or support.
- Continuous soap & water enemas weekly, to clear large bowel which would result only in producing blood and no faecal matter at all.
- Refusal to take interest in any nutritional supplements and vitamins or alternative practitioners for me. One GP advised " we are not taught about these things in medical school.."

- Doctors alternatively prescribing and withdrawing prescription of Clonazepam for seizures that I suffered constantly.
- A specialist treatment giving one week in hospital receiving IV Medazolam for seizures without any plan for at home treatment. Seizures continued at home.
- A tear sustained in my esophagus during six weekly stretching surgery. No real gain established by this gastroenterologist's practice.
- Unsuccessful drip feed of liquid meals by PEG tube for weight gain.
- Partial success of IV water hydration hindered by successive PEG infections at stoma requiring multiple hospitalisations and antibiotic administrations.
- General inappropriateness of PEG tube given main problem was gut inertia and malabsorption syndrome.

My many treatments at the hands of these regular GP's and standard hospital doctors resulted in me having a strong sense of going nowhere – and even going backwards in my health. I was not listened to, I was not believed often times. I was given inappropriate treatments and doctors would not consult with each other or suggest that other colleagues might know more. Over many years, this standard of treatment gave me no hope of ever getting better.

Fortunately, I found an integrative GP health practitioner that did give me hope :

- He was humble, not arrogant
- He listened to me. He was interested in me and acknowledged my illness and suffering.
- I was not blamed for have the symptoms I had.
- He allowed sufficient time to interact with me and study my years of issues and in depth history of medical problems – sometimes over one or two hours.
- We were not constrained to an inadequate 15 minute interview.
- He allowed time for questions and answered these clearly, not rushed.
- He advised he would seek out answers where necessary and discuss with colleagues where necessary.
- He said he would support me and do his best to help me for as long as it took, something that no other GP had ever said to me.

Treatment under this integrative GP health practitioner dramatically changed my life for the better and included :-

- Careful study of pathology tests to date. Additional scans and biopsies ordered. This improved insight & guidance and established an improved baseline for forward treatment.
- Improved consultation with other colleagues including surgeons, integrative GP's etc
- Improved clarity of diagnosis based on successful significant surgery
- Seizures finally managed appropriately with medication to stop daily attacks.
- Access to sub lingual troche medications at a compounding pharmacy which helps avoid seizures initiated by chemical sensitivity exposures such as offensive perfumes odours. This in particular assists with confidence in social situations and general public associations.
- My pain has been taken more seriously and suitably addressed by both pharmaceuticals and alternate techniques.
- Time taken by the Integrative Medical Doctor to ask specifically how well I was coping mentally and emotionally. The Doctor would listen to me and encourage my seeking counselling if necessary.
- Advice to attend an osteopath regularly for assistive improvement to reduce risk of mini strokes. This became valuable advice especially given my neck muscle weaknesses and also my various vein and artery abnormalities to right side of body. No further mini strokes have been suffered for some years since to the point of this submission date.
- Reduced symptoms of nausea and vomiting attributable to recommended herbal and nutritional advice given to me by the Integrative Medical Doctor.
- Improved weight management results, and avoiding weight loss by taking recommended nutritional supports and other non drug interventions. This has been particularly successful in thriving post Colectomy & abdomino perineal resection and similarly post gall bladder removal.

When I received care solely from regular medical practitioners, I stumbled along becoming sicker and sicker with no real hope of any tangible or reasonable future health. I often felt frightened and even threatened because of their standard approaches and lack of personal appreciation.

I want the Medical Board of Australia to know that I have been readily able to trust the Integrative Medical Doctors. These doctors are very willing to listen and think "outside the square" whilst retaining every professional measure. They consult widely with other colleagues and do not avoid verbal communications.

Integrative Medical Doctors should not be penalised for long consultations. This is often the only way a doctor can find out all the relevant information necessary for a considered diagnosis and appropriate treatment – especially in the case of complex and chronic conditions.

It has been the Integrative Doctors who have saved my life after years of sustaining no improvements in my health with regular GP's etc.

Integrative Medical Doctors that I have happily received services from have displayed tenacity, a willingness to research, read & study - factors that have directly given me health benefits not received from the regular world of GP's. This has also included learning modalities such as nutrition, not normally taught in medical schools, and accepting complementary medical practitioners such as Osteopaths.

My challenge has been to be healed of fearful memories of past experience received at the hands of many regular GP's. Fortunately this healing has been expedited to me because of the compassion, kindness and understanding I have received from Integrative Medical Doctors.

I now have a good quality of life with the help of others and within certain boundaries I never before envisioned or felt possible during the many years I only attended regular GP's.

#### **Recommendations :**

- I. Integrative Medical Doctors should be rewarded and applauded for their efforts they invest in their clients.
- II. I value free choice in making my own medical decisions and I ask that the Medical Board of Australia retain the status quo regarding public access to Integrative Medical Doctors who practice complementary and unconventional medicine with emerging treatments.
- III. Regular GP's have a place in the overall health system, and Integrative Medical Doctors also provide an equally important service to the Australian community. Both groups should be subject to equal standards and equal accountabilities of relevant official authorities and community clients.

Yours Sincerely

[Redacted Signature]

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**From:** [REDACTED]  
**Sent:** Sunday, 9 June 2019 12:33 AM  
**To:** medboardconsultation  
**Subject:** Chemically poisoned by hospital at work

Due to my damage from poisoning from. My job at hospital I had if damage systemic.and if it wasn't for wonderful doctor [REDACTED] who other nurse directed me to .My normal go refused to give me a referral how disgusting were is the Hippocratic oath they have taken DO NO HARM ,I would of been dead n buried .as I was Been seen by many many doctors GPS specialists who were going to send me to but BUT. house.guessing my condition MISDIAGNOSED and been treated like a Lab rat I can never ThAnk [REDACTED] enough for ongoing treatment for my life threatening injury.truly a human if only other GPS would care and have half the knowledge [REDACTED] has .government taxes and money would be better spent on educating gps on chronic disease e.g..poisoning and save money on less institutionlised patients who do not have mental illness.  
STILL HERE TO TELL MY STORY NOT DEAD NOT ALIVE REGARDS PKEASE WE NEED MORE LIKE [REDACTED]  
[REDACTED].WHAT WOULD YPU DO IF YOUR CHIKD FAMILY MEMBER GOT POISONED AT WORK ,GASPING FOR AIR.



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**From:** [REDACTED]  
**Sent:** Thursday, 27 June 2019 10:26 AM  
**To:** medboardconsultation  
**Subject:** Fw: Consultation on complementary and unconventional medicine and emerging treatments

To whom it may concern:

I choose Option 1 (no new regulations are required for doctors practising in the areas of complementary medicine and integrative medicine)

as I, and many members of my immediate family, have benefitted so much from seeing an Integrative Medicine doctor.

This doctor was the only person able to diagnose me after 3 years of breathing issues, when I had seen numerous other doctors and

specialists and all of them just said it was "stress and anxiety" causing the issues, when in fact it was pneumonia!!

My son has a few rare medical conditions and the Integrative Medicine doctor is the only one who is able to treat him for all of them.

Sincerely,

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Saturday, 29 June 2019 12:12 PM  
**To:** medboardconsultation  
**Subject:** Consultation on Complimentary and unconventional medicine and emerging treatments.

I went through a particularly harrowing time, until I discovered the help of integrative medicine.

We went from both being on great incomes, with a house mortgage and growing bank accounts, to sick and homeless within a year. It could happen to you.

My late husband had been told he should go home and get his things in order, that at best he had 3 months to do so, after being diagnosed with a neck cancer that was not treatable. We were living in [REDACTED] Queensland with very little choices as to what medical doctors were available so had driven to [REDACTED] for a specialist.

I had had cancer when I was younger and then in my 20s, and already knew some things I could do with natural methods.

I took him home struggling with my own health issues but started looking for other options. [REDACTED]  
[REDACTED] Dr James Doyle, was the doctor who first introduced Osteopathy to Australia and started the first training College in Ballarat, so I did know there could possibly be other choices.

I started to implement some dietary changes and then I got very sick, which resulted in me being in Emergency 4 times within a few weeks with suspected heart attack symptoms yet my heart was fine.

An elderly doctor from the coast came to Emerald and was in the Emergency on my 4th visit. I was upset and trying to get the staff to listen to me, that I needed a scan, he heard me and came in, he actually listened to me. Patients know their own body.

He immediately sent me for a scan of my abdominal area below the heart and I had a very large tumor on my left kidney, which was pressing up toward the other organs and causing the heart attack symptoms. He organised for me to be flown to Brisbane for surgery and for my husband to come with me. So I lost my left kidney.

No longer able to work with other symptoms which had been dogging me for years, I kept trying to get well, my husband couldn't work either so we had to sell our home and became homeless, yet hubby was getting better. 3 months after his initial diagnosis, we went to just ask for some pain relief to the doctor in Rockhampton. He was surprised [REDACTED] was looking so well.

He suggested we go to Brisbane to the Cancer clinic and see what they say. So we went. The doctors there said they could not cure the cancer but offered him radiation and chemo to try and reduce the tumor size, merely for pain relief. So he accepted the treatment.

While he was having treatment I also treated the radiation burns with natural therapies, so unbeknown to me I was actually putting into practise integrative medicine. The nurses were amazed at how the burns were sealed and blisters disappearing each time he went back for another hit. They asked me what I was doing.

I was recovering from my own surgery and we were able to stay in an apartment supplied from the cancer council which was much better than in the car.

After his treatment we started couch surfing around the Gold Coast and the damage to his nerves around the face and neck had caused some what like stroke victims have with dropped shoulder and less control over arm on that side, dropped face etc.

I saw a [REDACTED] about [REDACTED] who was on the [REDACTED] and having amazing success helping stroke Victims, so I contacted him. He agreed to see my husband at [REDACTED]. This was our introduction to Integrative medicine. Using normal medicine and natural therapies.

At this stage I was functioning at best 4 hours a day and doctors had not been able to tell me why. In my own research I had discovered a lot but was still missing a some keys to know what to do, and get a complete diagnosis.

Because of our situation, the lovely doctors actually treated us for free, and we did what we could with our contacts in the radio industry to get their clinic promoted. ([REDACTED] had history in the Radio Industry)

[REDACTED] got [REDACTED] shoulder and arm functioning again within a few weeks. He also got my left knee functioning so I no longer needed a cane. The integrative GP specialist ordered the blood tests I needed to track down and fully diagnose what was going on for me and we started a mixture of natural treatments along with I.V. medications to boost my immune system.

She also did a full hormone screen and helped me get the hormones that were causing cancers balanced. (I have had 8 estrogen cancers in my life, which started when I was 7 years old, and no G.P. had ever helped me with prevention even though I had asked, I realise now they just don't have the knowledge).

My sister who was a very qualified nurse in the system died of cancer in her 30's, she would not use the things I told her worked for me, and all the women in my family have struggled with these cancers. So the high estrogens were a major concern for me.

[REDACTED] lived another 4 years longer than expected, and thanks to integrative medicine had a better qualitative life than he would have without it. All the cancers cleared up in his lungs and other organs, but the one on the neck where he had radiation scarring was the one that took him out because the blood flow to that area was interfered with from the scarring so the natural therapies could not get through.

I still struggle sometimes getting what I need to keep my estrogens down. I went off my balancing hormones which a compounding pharmacist makes up for me, for a year to see if my body would be OK now. Because G. P's can be so hard to convince that I need them and I realise its because most of them do a weekend seminar on hormones, and have not studied them, other than the information from drug companies. I'm living in the country again now.

My integrative doctor said "[REDACTED] you need to understand you have been studying hormones for 20 years, so you know more than these doctors about hormones."

So now I'm working to bring down those dangerous hormones again. Working with a qualified integrative doctor, [REDACTED] which is expensive, a compounding pharmacy, and its imperative for my life to be able to do so.

Most G. P. s do not understand what I'm talking about, even if I can get one to listen.

To keep my muscles from freezing up due to other ongoing conditions, I need regular massage and natural treatments to keep me Mobil. I've recently been told that some of my treatments that help my quality of life, are no longer claimable on my medical benefits extras.

These treatments are what have taken me from 4 hours a day functioning, to being able to have a better quality of life, and even to be able to work now and contribute to the community. Not to mention less dependency on pain relief to function.

Do we need integrative medicine and practitioners? Yes we do, we need more freedom to choose what works for us, not more restrictions.

When [REDACTED] brought Osteopathy to this country, he was called all sorts of things, even though he had studied longer than most G.P's the different aspects of the human body.

Many Australians now go to Osteopaths or Chiropractors who have his signature on their certificate. He was an outstanding pioneer in the health industry. His training was second to none and the practitioners who went through his college were absolutely qualified.

Yes insist on professionalism, yes insist that those who are doing integrative medicine are well versed in their fields. However, do not make them harder to access, for the Australians that desperately need them.

Kind regards



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Phone: 



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**From:** [REDACTED]  
**Sent:** Friday, 7 June 2019 2:26 PM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

#### OPTION 1

1. **Tell your story about benefit you receive from complementary or unconventional medicine, or emerging treatment (CUMET) prescribed by a doctor.**

My daughter has been unwell for over 7 years with ME/CFS some years she was bed bound and sleeping up to 18 hours a day. She now functions solely due to the courage of her GP in prescribing CUMET including LDN, recommending pea pure and an antidepressant. These help her sleep and function at a minimal level, I am talking about her being able to get up, shower and being driven to/from a low energy activity two short days a week. If this help were to be removed I think we would have to move country as a family as she would be back to the horrendous time of sleeping her life away. GPs need to be able to prescribe off label, they do their research and know their patients needs. If this is removed it will increase online sourcing of these medications which will be un-monitored by a medically trained person and could put the person at risk as they will be desperate for a solution in an area where so few options exist. The GET and CBT research debacle is still hitting these people hard with many medically trained people still following these disproven guidelines.

2. **The need for these guidelines has been insufficiently justified.**

The existing guidelines cover all the issues which the MBA identified as needing to be addressed. The MBA also provided examples of complaints which have been upheld against doctors practising CUMET, suggesting that the existing guidelines are providing sufficient protection for the public.

3. **The proposed guidelines are likely to have unintended consequences which will impact the ability of patients to access appropriate care, and impact patients' freedom of choice.**

We believe these guidelines will disproportionately affect people with illnesses like ME/CFS, for which there are no safe evidence-based treatments and for which conventional medicine has little to offer. We are concerned that these guidelines will increase the burden on those doctors practising CUMET, and may discourage doctors from practising in this way, or increase patient costs of accessing these treatments, which is likely to result in increased harm to patients.

We are especially concerned about patients having reduced access to helpful treatments, and losing freedom of choice in their care. We also believe that it is better for patients to access treatments through doctors, a profession which is already well-regulated, than turning to other health professionals who will be less well-regulated and could therefore pose greater risk of harm to patients.

Please show concern and give consideration that many will submit opinions to this consultation as carers and family members of people with ME/CFS as they are unable to do this themselves. These people are relying on their GPs to provide them with a lifeline.

Kind regards,  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Friday, 28 June 2019 5:07 PM  
**To:** medboardconsultation  
**Cc:** [REDACTED]  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To:

Executive Officer, Medical

Australian Health Practitioner Regulation Agency (AHPRA)

GPO Box 9958

Melbourne 3001

Ref: Consultation on complementary and unconventional medicine and emerging treatments

Dear Sir/Madam

In reference to the Public Consultation Paper - Public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments, I choose the following:

- To maintain my own choice of freedom of practitioner, including conventional, complementary and 'unconventional'
- To maintain my own freedom of choice of therapy

I choose to exercise my right under the Australian Charter of Healthcare (2007-8) to be included in decisions about my healthcare.

My family (myself, my husband & 3 children) have previously had, and now recovered from, varying degrees of chronic illness, particularly my son (autism) and my husband (CFS).

We now all enjoy vibrant health and continue to use the so-called "alternative" treatments to maintain and improve our health.

Our successful outcomes came after many difficult years seeing more than 20 conventionally trained medical doctors and/or specialists who commonly denied any problem and/or confessed ignorance of any way to actually help us, apart from offering symptom-suppressing pharmaceutical drugs.

Humanity is now in a time of transition from a 'one size fits all' conventional medicine approach to individualised health care system which draws liberally from evidence-based new and ancient healing therapies.

There is a saying "**there are none so blind as those who will not see**".

Also, from Upton Sinclair: "**It is difficult to get a man to understand something, when his salary depends on his not understanding it.**"

Please, open your eyes to the science and evidence around healing rather than clinging to the conventional medicine model of symptom-suppression and attempting to fool us into believing there is no evidence for these 'alternative' methods. After all, most of us who have learnt about these methods have arrived where we are due to the failure of conventional medicine to help us. WE ARE OUR OWN EVIDENCE.

The Australian people demand more than this.

In summary, I oppose further changes or additions to the existing Code of Conduct 2014.

I submit this letter for the maintenance of current status: OPTION 1.

Regards

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Monday, 29 April 2019 5:44 PM  
**To:** medboardconsultation  
**Cc:** [REDACTED]  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To:  
Executive Officer, Medical  
Australian Health Practitioner Regulation Agency (AHPRA)  
GPO Box 9958  
Melbourne 3001

Ref: Consultation on complementary and unconventional medicine and emerging treatments

Dear Sir/Madam

In reference to the Public Consultation Paper - Public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments, I choose the following:

- To maintain my own choice of freedom of practitioner, including conventional, complementary and 'unconventional'
- To maintain my own freedom of choice of therapy

I choose to exercise my right under the Australian Charter of Healthcare (2007-8) to be included in decisions about my healthcare.

My family (myself, my wife & 3 children) have previously had, and now recovered from, varying degrees of chronic illness, particularly my son (autism) and I (CFS).

We now all enjoy vibrant health.

In my opinion, our successful outcomes would not have been possible without our right to choose and use a range of practitioners including conventional, complementary and 'unconventional'

In summary, I oppose further changes or additions to the existing Code of Conduct 2014.

I submit this letter for the maintenance of current status: OPTION 1.

Regards

[REDACTED]

[REDACTED]



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**From:** [REDACTED]  
**Sent:** Wednesday, 6 March 2019 9:49 PM  
**To:** medboardconsultation  
**Subject:** Regarding the public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments

To whom it may concern,

As an Australian citizen I feel it's important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

I have been suffering from Pyrolles, Infertility, Underactive Thyroid (almost Hashimoto's) and other issues:

Conventional medical doctors have not been able to successfully treat my condition(s) and bring me to a satisfactory level of health.

Pharmaceuticals and the use of conventional methods simply did not work (and in some instances also delivered unwanted side-effects in my case) and, seemed to waste Medicare funds and resources.

It was only when I saw an integrative medical doctor who included lifestyle change, diet and supplements of vitamins and minerals to address my problems that my condition began to improve.

If I cannot see an integrative doctor, or the Doctor is restricted in what he or she is able to prescribe for me, I feel that my health will deteriorate and have a continuing impact on my family, my work, and my wellbeing.

Concerned,

Name: [REDACTED]

Signature: [REDACTED]

Date: 06 / 03 / 2019

Occupation: Travel Agent

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**From:** [REDACTED]  
**Sent:** Friday, 10 May 2019 2:49 PM  
**To:** medboardconsultation  
**Cc:** [REDACTED]  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

I have been compelled to express my thoughts on the further regulation of integrative medicine. When I first found out about integrative medical practitioners treating patients in this manner, I was excited. Since going to an integrative doctor, I have never looked back and I am very grateful.

If the Australian Medical Board regulates integrative medicine even further, they would be doing a great disservice and injustice to medicine in Australia and to all Australians. As an Australian, my rights for freedom of choice are being further eroded. I am not a child, I don't need a nanny, I don't need a governing body to tell me, what is and what is not, good for me, in accordance to their narrow minds and opinions. Therefore not allowing me to have treatment for my illness. I feel that my liberty to choose how to look after my wellbeing is being taken away from me.

I have a chronic ongoing health condition that started in my early teens. My parents took me to various doctors for help, I was treated with contempt and a few doctors told my parents that I had psychological issues. My personal opinion is that they did not have the skill set to know how to diagnose and treat my extensive symptoms. I refused to go to 'conventional' doctors anymore. Years passed and my health deteriorated even further, so I tried alternative treatments, which still didn't help me. So I decided to go back to 'conventional' doctors. Once again, I had a couple of doctors telling me that I had psychological issues, one actually told me that I was crazy. By this stage I was not only sick and worn out, but I was furious. I continued on my quest for better health and found a decent GP who tried to help. However, it was through my desperation that I requested certain tests and investigations. The doctor wholeheartedly agreed to some tests, but others were questioned, yet he would refer me anyway, as he understood my predicament. In particular, I was allergy tested, (back in the day, that was not a common occurrence). That proved to be a helpful investigation, as I am allergic to quite a few things. Unfortunately my health still continued to deteriorate, as the cause of my illness was still unknown. I would only go to the doctor for pain killers and antibiotics to try to manage my illness and I would avoid all allergens as much as possible.

Fast forward twenty plus years, I am so unwell and now suffering with chronic fatigue, I would sleep very badly at night, due to pain and during the day I could barely lift a finger, keep my eyes open and my concentration was zero. I couldn't even comprehend one sentence on a page.

Finally someone recommended an integrative doctor and that's when I received proper help, investigation and solutions for the first time. It has taken a while, but I feel like I have been given a second chance at life, I can contribute and participate again.

There has never been inappropriate use of 'alternative', 'unconventional', or 'emerging' treatments.

I am quite incensed that there is a use of semantics in reference to integrative medicine. Is this done to confuse patients? You are insulting our intelligence. At the end of the day, everyone must be accountable for their own actions or inactions. I make the ultimate decision as to whether I go to see a particular doctor or to go ahead with any treatment. Trust me, I have walked out of a few doctors rooms, (all conventional doctors), sometimes politely with grace and others, with the doctor knowing exactly what I think. I've always had to pay those bills, even though there was no help in my health!

I have travelled extensively and when I have been sick I have gone to doctors in Europe. They treat patients and illness somewhat differently, on occasions I have been prescribed herbal teas and tinctures before antibiotics. When I have explained to these doctors that that doesn't happen here in Australia, they are quite surprised. Traditional medicines are revered in many countries because they are effective, tried and tested. They have been used for hundreds, if not thousands of years which is valid and evidence based.

I'm afraid that the Australian medical system is going backwards, We are not seen as a progressive and forward thinking country. Perhaps something that hasn't been taken into consideration is that a sick community is an unproductive one and costly to the economy. I have wasted many years being unwell and a burden to my family. I was out of the work force for quite a long period of time. Had I had the help from an integrative doctor much earlier in my life, I would not have gotten so sick and would have continued in my career. Thankfully I am back on track, no thanks to the dreadful treatment I have received from conventional doctors.

Regards,  
[REDACTED]

**From:** [REDACTED]  
**To:** [medboardconsultation](#)  
**Subject:** 'Public consultation on complementary and unconventional medicine and emerging treatments'  
**Date:** Tuesday, 5 March 2019 3:21:25 PM

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As an Australian citizen, and a person with specific, individualised health requirements, I feel it's important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

Conventional medical doctors were not able to successfully treat me and bring me to a satisfactory level of health. In fact I was told I had little chance of recovery.

Initial use of pharmaceuticals and conventional methods simply did not work, delivered unwanted side-effects which in my case, contributed to a fast decline in my health.

It was only when I saw an integrative medical doctor and sought naturopathic care, which included lifestyle change, diet, herbal individualised prescriptions based on my presenting health symptoms and supplements of vitamins and minerals to address my problems, that my condition began to improve.

Taken from your article in reference to complementary /unconventional medicines - <https://www.medicalboard.gov.au/.../2019-02-15-public-consult...>

***Concerns include patients being offered and/or having treatments:***

- ***for which the safety and efficacy are not known***
- ***which may be unnecessary***
- ***that expose them to serious side-effects***
- ***that may result in delayed access to more effective treatment options.***

These same words can be accurately applied to conventional medicine. Taking prescribed medications for the severe illness I had, exposed me to all the above.

The illness I have, Lyme disease, is denied by the government & medical profession. Therefore conventional medicine is not available to me, or the thousands of other Australians also suffering Lyme disease.

"In the fullness of time, the mainstream handling of Chronic Lyme disease will be viewed as one of the most shameful episodes in the history of medicine because elements of academic medicine, elements of government and virtually the entire insurance industry have colluded to deny a disease. This has resulted in needless suffering of many individuals who deteriorate and sometimes die for lack of timely application of treatment or denial of treatment beyond some arbitrary duration."

Kenneth B. Liegner, MD  
Internal & Critical Care Medicine, Private Practice  
Pawling, NY

It is reprehensible to even consider removing these complementary health practices for people like myself who have NO OTHER MEDICAL HELP given to them.

Yours faithfully

[REDACTED]

The Medical Board of Australia

## Consultation on complementary and unconventional medicine and emerging treatments.

My name is [REDACTED], age [REDACTED],  
I am owner of [REDACTED],  
Owner [REDACTED]

I am a Transgendered man, and without the use of conventional medication like testosterone I would be a very withdrawn depressed and dysfunctional human.  
So I have a very strong appreciation for conventional medicine.

But, after a few years I became a mess at age 23, I called a ambulance on several occasions due to a pounding heart and severe tingling through my face and arms. This would sometimes last more than 30 minutes. I took myself for a 24hr ECG to test what could be felt like strong heart palpitations several times a day that would make me feel so sick.

If I wanted to avoid/minimize this I needed to get good sleep, not eat any bad food that triggered it and it generally meant I had to be with my wife who pat my head and held me till I could fall asleep and be at peace, often I had the fear I wouldn't wake up.

I was never given a blood test to see if it was a heart issue after the acute attacks causing me to head to hospital. I did see a specialist who said my heart was fine by the use of a stress test.

This debilitating unprovoked anxiety went on for over a year.  
It controlled my life so much I gave up my job with extra pay working night and stopped my testosterone medication and endured the return of my period.

I could only be offered counselling which I took on board or anti-anxiety medication & I't was not something I wished to start.

**The main goal in assisting health in a patient in medicine should be to treat the cause not the symptom.**

Over a year of this debilitation was too much to tolerate.  
I sought out what you might consider unconventional medicine,  
I was told by the practitioner he believes my blood sugar isn't great and I needed some nervous system support,  
I was given  
Bio-chromium Plus from Blackmores professional 2 morning 2 night  
Metagenics – Neurocalm up to 4 tablets if I felt anxiety coming on.  
I was asked to cut out dairy and wheat and live a healthier lifestyle.  
Due to the circumstance I was desperate & very disciplined to follow the treatment advice.

What I didn't expect was for it all to start working within 1-2 days, the heart palpitations were gone & the neurocalm was doing its job & I started feeling so much better that I went back on my testosterone injections under the care of my endocrinologist.

The next part of this story is what made me realize

THE CONVENTIONAL TREATMENT OF A LOT OF ANXIETY IN PATIENTS IS DOING MORE HARM THAN GOOD!!

The symptoms started coming back, the heart palpitations returned & I was a wreck again, but I knew it wasn't my heart because it was treated with supplements that supported anxiety & blood sugar.

I returned to the practitioner a 90-minute drive away & he told me my liver isn't coping with the medication and I needed to take Metagenics – Silymarin 1 morning, 1 lunch, 1 dinner.

Again, I followed the treatment plan, lost more body fat and regained control of my life for good.

Since this time I've helped hundreds of people drop body fat to improve their self worth and health.

I've also helped my mother get off 20 units of insulin (with a blood sugar reading over 15 she would have had to increase the dose) a day by helping her realize,

SUGAR IS LIKE CRACK & I told her  
INSULIN IS LIKE VALIUM = Done take the crack and you don't need the valium.  
She now maintains a healthier blood sugar range of under 7 and is free of Insulin injections.

My last point I need you to know is there is another transgendered friend of mine who is now dead.

This friend was Xanax dependent in order to function or a alcoholic in his words to get by the day.

This friend [REDACTED] was previously named [REDACTED] & can be seen on facebook [REDACTED]  
[REDACTED]

If I became dependant on this sort of drug which made me feel like I couldn't function I properly would have ended up wanting to end my life too.

End point, you cannot take away a person's choice to their care & you shouldn't reprimand an integrative medicine caregiver who is helping someone.

There are people out there better off without conventional medicine and they should be referred to a practitioner who could help & not a stigma about the alternative therapist.

Conventional medicine has a lot to still learn and the head of this department has a lot to consider. Thankyou [REDACTED]

10<sup>th</sup> May 2019

Dear Sir/Madam,

My Name is [REDACTED], and I would like to respond to the ***call for public consultation on unconventional medicine.***

I would like to outline *my support of unconventional medicine* and share below my personal experiences and the benefits I have gained with same.

For many years now, after consultation with my medical Doctor, I have been actively undertaking vitamin/mineral IV therapy on a monthly to bi monthly basis.

My medical Doctor has always been thorough and professional when explaining the possible benefits and risks associated with the treatment I am receiving. I have never had any side effects from the treatments I have received except continued good health without succumbing to yearly flus, viral and other infections. It has had a large positive impact on fatigue and other issues *I have suffered due to chronic obstructive sleep apnoea*. A condition that I understand is growing in its diagnosis and of which the long term effects on health and cost to our health system is still being determined.

This impact was felt after commencing these treatments regularly. Although not a conventional treatment, but has proven to me to be absolutely effective. I had taken many Vitamin C and other recommended supplements orally as is conventional, and although I am sure they had some impact, did not appear to have the same benefit as once the vitamin therapy by IV was administered.

This is the same vitamins, in larger doses that cannot be administered orally (45gms taken orally?? Not really practical or possible daily).

It would also seem hasty to group ALL non-traditional therapies under the one category or one code of conduct requirement or legislation. This is not beneficial to the greater public who use these treatments, and penalises those members of the public that strive to be proactive in managing the diseases they currently have, or may be trying to prevent.

When I had finished my first IV treatment and I went into my Health provider to see if I could claim part of the treatment back. I was so surprised that the lady at the counter told me that the Government won't allow us to pay any benefits for Vitamin treatments. I was shocked to hear this especially considering the amount of money the Government pay under the PBS scheme and we know that some of these recognised treatments can have severe side effects. Any person who knows someone who has had cancer treatments can testify to the side effects from traditional medical treatments, unfortunately in the last few years I have had the experience of seeing friends and family go through various forms of cancer treatment, all but one so far has died and the side effects of those treatments have been nothing short of horrendous. I can, if you require, reference all of these but for the sake of simply registering my support of unconventional medicine I have refrained.

Interestingly the ONLY friend who has not succumbed to cancer at this stage is the one who is diligently undertaking IV Vitamin therapy.

I could never put Vitamin treatments in the same risk category as these cancer treatments. In saying that I am not against traditional medical treatments, I just disagree that we should close or restrict the other more non-traditional treatments at the *very least* to those who could benefit the most from them.

I understand to some degree that lobby monies come from big Pharma and they have quite an influence in what happens in the medical community, and that most vitamin or non-traditional treatments are made by compounding pharmacies thereby by-passing these companies, BUT THIS SHOULD NOT influence Government in making these types of treatments harder to get.

I have seen the effect firsthand of what the Government has done to already restrict compounding pharmacies. Now it seems like they want to make it even more difficult. This is not fair on the consumer and does not give access to treatments that we as adults under the guidance of our own medical Doctors, should be able to make.

I would be very happy to speak with someone to clarify or expand on any of the points mentioned in my letter, including findings with regards to my own research conducted on unconventional medicines, in the spirit of helping promote the best available health care to the Australian public. While such treatments may not be for everyone, the freedom to choose should be.

In Summation, ***Please stick with Option 1 and keep things as they are.***

**I agree with these assessments of the new proposed legislation:**

- Created unnecessary guidelines, as the current Code of Practice already addresses all safety and efficacy issues related to Integrative Medicine. This was a waste of taxpayer money;
- Breached its own COAG Principles in creating the document, including restriction of consumer choice of their own doctor outside “conventional” medical practice;
- Failed to consult with the Integrative Medicine community in the planning and development of the regulations, leading to a lack of procedural fairness;
- Failed to identify any significant concerns about the safety of Integrative Medicine or any risk to the public; and
- Linked Integrative Medicine, at the lowest end of risk to patients, with high risk experimental interventions in a single flawed group definition.

I thank you for taking the time to read this letter,  
Kind regards

A black rectangular redaction box covering the signature area.

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**From:** [REDACTED]  
**Sent:** Friday, 15 March 2019 10:08 AM  
**To:** medboardconsultation  
**Subject:** 'Public consultation on complementary and unconventional medicine and emerging treatments

To whom it may concern

I wish to say that I am both trusting and confident in the treatment that my family are receiving from [REDACTED]

[REDACTED] The clinic have a very good symbiotic relationship with the [REDACTED] oncology department in their joint treatment of my daughter's cancer battle.

If the hospital were able to provide the treatment necessary to help my daughter then I would not have need to seek alternative avenues.

Our naturopathic oncologist and our hospital oncologist are in constant communication and their treatment has been complimentary to each other's needs at that time and is in no way a conflict.

I chose this clinic on a recommendation from a professional naturopathic practitioner and thoroughly examined their practices and protocols. At no time have I had any reason to doubt their methods or prescriptions. Every change to the treatment is after a lengthy consultation with both my family and the oncologist treating my daughter at the [REDACTED].

I can honestly say that the approach we have taken has been in a big way the reason that my daughter is progressing so well towards a successful end to her journey.

If we had not then I feel we would not be at the point we are now.

I recognise that not all practitioners are as professional and ethical, but in our case this far from the truth.





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**From:** [REDACTED]  
**Sent:** Tuesday, 26 March 2019 1:26 PM  
**To:** medboardconsultation  
**Subject:** Submission to Australian Health Practitioner Regulation Agency regarding Consultation Paper released in February 2019

To whom this may concern

I would like to make a submission in relation to the Consultation paper released in February by the Medical Board of Australia (MBA) that aims to: redefine what is 'safe' medical 'practice' in Australia.

I am unsure what the MBA defines as "safe medical practice" but if it in any way seeks to exclude naturopathy, the administration of herbs or other alternative therapies from what is safe then this is eroding a patient's fundamental right of choice.

I would like to provide you with my very successful experience with naturopathy over the last 7 years and how it assisted me to have two healthy children.

I was in my late thirties and had just suffered a miscarriage and was very upset at the loss of my first pregnancy.

I had just moved to a new area, the northern beaches and was looking for a new doctor. I found a female doctor with over 30 years' experience in medicine combined with naturopathy. When I went for my first consultation I explained to her what had happened with my miscarriage and she took some tests (blood tests and a hair test) and we discussed my general health, family history and medical history. It was the first time in my life that I have been very happy with a doctor and who really examined me holistically. In my experience, most doctors tended to treat the symptoms rather than look at your entire health, family history etc.

After the results of my tests were discussed with me at a second appointment, we embarked on a series of herbs to clear my system of heavy metals and to ensure that my immune system and gut health were healthy. After about two years of treatment, I fell pregnant again with a very healthy pregnancy and gave birth to my first daughter on 17 March 2016. My doctor also prescribed me with a doctor only prescribed pregnancy vitamin which was excellent and which I could not have obtained from a GP.

I continued with check-ups and then a year later feel pregnant naturally again with my second child. My second daughter was born on 20 October 2017.

My practitioner advised me that she has had a 100% percent success rate with her natural treatment for conceiving and carrying a healthy baby. She was correct.

I am so very grateful to my doctor who assisted me to have the two health daughters that I have today (without the need for intrusive and expensive infertility treatment). If I had not had this option available to me then my only option would have been fertility treatment which not everyone can afford at \$10,000 per treatment.

To deprive others of alternative treatments such as the use of natural herbs because they may be considered "an unsafe medical practice" would in my opinion be absurd. It would also be depriving future mothers of alternative options so that they can conceive naturally and experience one of the greatest moments of their lives.

I am very happy to discuss my experience further should you require any additional information.

Kind regards

[REDACTED]

[REDACTED]

Submission by [REDACTED], [REDACTED]

I am female, now aged 50. I was diagnosed as type 2 diabetic 18 months ago by my GP, at age 49. At the time, he offered me a website to get further information and gave me a pathology request to have my HbA1c tested in 6 months time. A suggestion was made that losing weight may help and that was the only advice and support provided. I then went to see an integrative medicine GP who offered specific dietary and lifestyle advice, recommended particular supplements to assist with BSLs and is monitoring my blood test results with more interest than the GP. I have the impression that the GP is simply waiting for my HbA1c to reach a level that he can prescribe metformin or other drugs to control BSLs, rather than trying to slow the progression.

In mid 2018 I was diagnosed with breast cancer. This was addressed by a surgeon (lumpectomy) and I had a great outcome. Again, I was not offered any lifestyle or other suggestions, simply advised to regularly check for lumps and have annual scans. The integrative medicine GP has been working with me to reduce systemic inflammation and I hope this will support me to maintain good health and reduce risk of recurrence of any cancer.

The integrative medicine GP has also undertaken genetic and other (bloods, poo) testing to investigate fatigue and brain fog that has plagued me for 25 years. My usual GP has not had anything to offer me for these issues and it was impacting on my work capacity which of course impacts on my financial situation. I am taking the advice of my integrative medicine GP and since October 2018 have noticed that my brain fog is lifting, my energy levels are increasing and I have more capacity to live my life to the full. This has enormous benefits for my children, husband and ageing mother (85 years) who I am better able to care for and keep her living independently.

I have had a side effect to one of the supplements (diarrhea), but the integrative medicine GP monitored it closely and supported me to identify the cause. Once I stopped the particular supplement, the issue was resolved quickly. It was an unusual reaction to the supplement.

I particularly appreciate the longer appointment times that the integrative medicine GP provides. I feel like this gives him an opportunity to look widely and deeply to understand my health. A 6-10 minute appointment with a GP is only sufficient for a script, a referral or a certificate, with no time to discuss or explore health.

Integrative medicine is an expensive process and I am lucky to have the resources to proceed. I do not see this as an issue with the integrative medicine GP I see, but rather with the health system. I understand that Medicare and the PBS need to be sustainable, but in that system, there is no value placed on maintaining wellness which would be cheaper than treating disease. Greater investment by the Government in maintaining health and wellbeing is needed.

1. Do you agree with the proposed term 'complementary and unconventional medicine and emerging treatments'?  
If not, what term should be used and how should it be defined?

I do not agree with the term unconventional – I prefer complementary, integrative, functional and emerging treatments.

2. Do you agree with the proposed definition of complementary and unconventional medicine and emerging treatments – ‘any assessment, diagnostic technique or procedure, diagnosis, practice,<sup>1</sup> medicine, therapy or treatment that is not usually considered to be part of conventional medicine, whether used in addition to, or instead of, conventional medicine. This includes unconventional use of approved medical devices and therapies.’  
If not, how should it be defined?

I do not agree with the definition. Rather than ‘usually’ I think it should be ‘currently’ as I believe that the practitioners are basing their treatment on more current research that has not yet made it into the AMA guidelines, but may in time (years unfortunately).

3. Do you agree with the nature and extent of the issues identified in relation to medical practitioners who provide ‘complementary and unconventional medicine and emerging treatments’?

If they are based on patient complaints or feedback, then they can be raised as issues.

4. Are there other concerns with the practice of ‘complementary and unconventional medicine and emerging treatments’ by medical practitioners that the Board has not identified?

No issues have arisen for me as a patient.

5. Are safeguards needed for patients who seek ‘complementary and unconventional medicine and emerging treatments’?

Not any more than for general GPs – there is a range of quality out there in GP clinics and I’m more concerned about them, as people who cannot afford to seek alternative opinions or pay for non bulk billing services may only have access to some not so great GPs, or a constant churn of GP in clinics, to look after their health.

6. Is there other evidence and data available that could help inform the Board’s proposals?

I’m not aware of any as I’m not a scientist.

### **Options**

7. Is the current regulation (i.e. the Board’s *Good medical practice*) of medical practitioners who provide complementary and unconventional medicine and emerging treatments (option one) adequate to address the issues identified and protect patients?

Yes. I support Option 1 - Retain the status quo of providing general guidance about the Board’s expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board’s approved code of conduct.

8. Would guidelines for medical practitioners, issued by the Medical Board (option two) address the issues identified in this area of medicine?

I don’t think it is needed. Current standards applying to all medical practitioners should be sufficient and if they’re not, then the changes should be brought in for all, including mainstream GPs as there is certainly a mix of capacity among them, and other specialists.

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**From:** [REDACTED]  
**Sent:** Monday, 6 May 2019 5:18 PM  
**To:** medboardconsultation  
**Subject:** My Health My Choice

## **My Health My Choice.**

I seek medical treatment from many sources, MBA appointed Doctors, Specialists, Professors (conventional) plus I choose other treatments (unconventional) to ease medical conditions, pain and to make my life more comfortable.

I am 70 years old and I find the best is to combine both conventional and unconventional treatments. Both serve their place in our modern society. We deserve the right to choose who we want to take charge of our medical care.

I have suffered from extreme pain all my life and have fibromyalgia. I had my appendix out when I was four years old. I have had two children. I have had a hysterectomy. I have bowel and bladder issues. My bones in my back are pressing on my spinal cord. I suffer from arthritis as everyone else does. We need what you call conventional treatments but I can tell you medications prescribed by MBA approved Doctors have their place, but it is what you call unconventional treatment practices that have given me relief from pain, without the use of so many prescribed medications. I once lived on anti-inflammatory and pain tablets. I could not have worked and looked after my family without them. I still use prescribed medications, but not as many as before I sought out other ways of coping with ailments, and the discomfort and pain they cause.

I have been having and still have acupuncture for over 40 years. I have seen Chiropractors, Physiotherapist. I have been seeing a Podiatrist for manipulation on my rigid feet for many years now. I have regular massages. Seen Naturopaths, use vitamins, minerals, Chinese medications, herbal supplements and natural therapies. I exercise regularly. My husband also uses what you call alternative, unconventional medicine practices. Lately he has been under a Professor for extreme pain in his shoulders, arms, back to no avail except to take regular high costing fees off us. He has been seeing an Osteopath and after only three treatments has been finally getting pain relief and is now able to sleep without being in agony all night. He is now able to do things again and get enjoyment out of life once more.

I use a compounding chemist for my hormone replacement cream. I regularly seek advice from pharmacists. One of our Grandsons who is Autistic regularly has to see MBA

appointed Doctors, Speech Pathologists, Psychologists, Physiotherapists, Occupational Therapists, Exercise Physiologists, Dieticians for leaky gut problems and the list goes on. He also has medicine made up by the compounding Chemist.

Where would we be without all this extra help and care these people provide? It is our RIGHT to use these treatments. It is our CHOICE to use these treatments. People are not silly, they know they need to seek other forms of treatments other than going to the local Doctors and being prescribed medications all the time, or just getting referrals continually to see Specialists.

I remember before MBA appointed Doctors were even using acupuncture and other forms of treatments. Why are they now using them if they are not happy with the treatments?

Why do you think so many now see the benefits it provides and the pain relief it gives?

**I value my right of choice in healthcare.**

**I want my voice to be heard.**

I want to continue using all forms of treatment and you have no right to only allow the use of what you class as conventional MBA appointed Doctors and their form of treatments, which usually just ends up being more and more tablets to take. What evidence do you have that these alternative treatments are not beneficial to us?

The term complementary medicine includes access to traditional medicines which is our basic human right.

As in any profession there are good and bad practitioners. We can't have one rule for some practitioners and one rule for others. The key is ensuring regulation is focussed on the health and safety of ALL Australians. There should be only ONE set of good practice guidelines that ALL doctors should follow.

[REDACTED]

EMAIL: [REDACTED]

Telephone: [REDACTED]

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**From:** [REDACTED]  
**Sent:** Saturday, 22 June 2019 10:24 AM  
**To:** medboardconsultation  
**Subject:** Changes to regulations around complementary and unconventional medicines

To the Executive Officer and other vested parties,

My name is [REDACTED]. I am 39yrs old and I live in New South Wales. I am greatly concerned about the proposed "strict new set of regulations governing the practice of "Complimentary and Unconventional and Emerging medicine"".

My brother suffers from lyme disease and has toxic mould in his blood. He uses complementary, unconventional and emerging medicine, with significant effect, for his illnesses. These medicines allow him a greater quality of life; allowing him to function well enough to work and be a good husband and father.

The effect of these proposed regulations will be:

- **Increased financial costs** that will add strain to his family
- **take away his right to choose** appropriate medication for his body
- **potential loss of his doctor**, if they are deregistered for continuing to provide life saving, but now unregulated medical treatment.

**Most importantly, the antibiotics that my brother needs will no longer be available.** This medicine is making him better and by taking away his right to access it, you are condemning him to stay under the vices of his illnesses. This lowers his quality of life, effects his whole family and puts a strain on the government when he can't go to work and requires financial assistance.

I understand that these changes have been suggested because of the complaints of a minority, regarding their unfortunate yet individual and rare poor experiences. I strongly encourage you to not disregard the majority voice for the right to seek out an integrative treatment accessing the best of both orthodox and natural therapies.

I value the right of all Australians for free choice in medical treatments and request that the medical board :

**Reject the new regulations and retain the status quo.**

If this is not possible, I request

- a regulation that applies to all medical practitioners with the same onus of exhaustive exposition of all treatment options, and
- the board accept that Integrative Medicine, utilising Complementary or Unconventional or Emerging Medicine as well as conventional medicine, be recognised as a Specialty, in order to allow increased Medicare rebates to help cover the increased costs of fulfilling the new regulations.

Sincerely,  
[REDACTED]

12/4/19

To whom it may concern,

I am writing in response to the request for public feedback on your latest proposal to put greater AMA control on alternative/natural health practices.

Firstly I choose option 1 ... to leave it as it is now

I am becoming irate at the continual push by the AMA to regulate out of existence any form(s) of natural / alternative medical treatment that does not fall under the rubric of allopathic medicine. The foundation of good health (and I mean good health and not the absence of symptoms) is diet/supplements, lifestyle changes and stress management. These are the three pillars upon which our health is built, and are the three areas that allopathy has limited knowledge about.

The role of allopathy is vital in illness/disease management as symptom management is vital in life threatening conditions/situations. I for one am extremely grateful to the wonderful advances of allopathic medicine in the areas of surgery and emergency management, and owe my life to the wonderful skills and treatments I received after suffering a significant heart attack. In these areas western medicine shines.

However in the areas of prevention and resolution of the ever increasing range of autoimmune/inflammatory diseases etc, etc, it has been largely unsuccessful. The reason for this, is that as a paradigm, allopathy treats symptoms and almost never treats the underlying root cause. Developed pharmaceutical drugs target a vast array of symptoms but rarely heal/cure the actual problem. This is where alternative / natural treatments come in. They attempt to treat the root cause

When it comes to my own health, I have had wonderful success with surgeries that has been lifesaving /have resolved intractable problems. This is a given. However I have also had wonderful success with healing a number of very challenging issues using diet changes/ targeted supplements and lifestyle/stress changes, hence I know firsthand, the value of these approaches.

Consider as an example:

I had ongoing bladder micturition problems, resulting in at times a real inability to urinate. The allopathic solution was initially for drugs to target my slightly enlarged prostate/potential surgery. The integrative approach was to look at the bigger picture, to include other symptoms I was experiencing ... (slow wound healing/ focal thickening of the bladder wall/ nasal thickening/ dry eyes) A genetic test was done to look at the possibility of a Vit A deficiency. Sure enough I had BCMO1 snp's, which confer a reduced conversion of beta-carotene in the diet to retinoic acid. This was then backed up by a beta-carotene serum test, which indeed showed beta-carotene levels extremely high.

Diagnosis ... potential subclinical Vit A deficiency. Treatment was to take pre-formed Vit A (rda 3000IU/day (cod liver oil) Result ... urination/bladder function returned to normal/dry eyes resolved/wound healing normalised/nasal thickening reduced/focal thickening in bladder wall disappeared



So this is a very personal example of where an Integrative approach was very successful in resolving a number of very challenging health problems. The use of 5 alpha reductase inhibitor drugs as recommended initially (allopathic practitioner) would never have resolved the root issue and may then have lead me further on to surgery, without the actual problem being addressed (vit A deficiency), and still bladder problems. An integrative medical approach which looked at diet changes/supplements etc /genetics to address the root problem was successful and potentially saved me years of bladder/urination problems..

So by attempting to constrain medical practitioners from using an integrative approach (combining diet/supplements/lifestyle changes with pharmaceutical/surgical solution), you would have taken away a very important approach that in my case actually worked, and healed the root cause of all these problems.

Over my lifetime I have seen the constant attacks by allopathy on any /all forms of natural/alternative treatments and it offends me. Everything is done on the basis of 'evidence based medicine', as though you are saving' me from myself' and from all the dishonest alternative practitioners who use natural modalities. Yet if you look closely into this claim which legitimizes allopathy and tries to de-legitimize everything else, you find some disturbing facts.

Consider this recent statement by Dr Marcia Angell , the past editor of the prestigious NEJM

*"It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of The New England Journal of Medicine." (due to conflicts of interest)*

Another medical professional said it like this *"In the day and age when scientists are being funded by corporations to find the specific data they're looking for, we have conflict of interest science. Tell me who funds your lab and we'll be the judge if it remains credible. Science got bought out along with our politicians long ago".*

So I say to you, get your own house in order before you try to destroy anyone else.

There is a place for integrative medicine practitioners who combine both natural and pharmaceutical/surgical solutions together, using the best of both worlds. Please do not legislate integrative approaches out of existence. I have the right as a tax payer, to decide where MY tax dollars go in the medical budget, and which modalities are to be included/supported. You do not speak for all patients, when you try to limit the integrative approach. Unfortunately I believe you speak mostly from your own financial self-interest, and I for one take exception at that.

Yours sincerely

██████████ (concerned member of the public)

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**From:** [REDACTED]  
**Sent:** Thursday, 27 June 2019 5:57 PM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

Good afternoon

Thank you for accepting public submissions with regard to this important decision making process.

I was concerned that the guidelines were drafted without due consultation with Integrative Medicine (IM) Doctors, patients and the community and were drawn up as a consequence of patient complaints received over time. I suppose you would not often receive rave reviews for doctors as it is your main duty to deal with complaints, however I hope that, through the public consultation process, you will receive a flood of support for IM doctors and their 'complementary, unconventional medicine and emerging treatments'.

We have had a lot of encounters with IM Doctors over the years and other complementary practitioners. I have had great success reducing my Cholesterol, blood sugar, blood pressure, weight to name a few all with the help of 'natural medicine' and lifestyle changes. For those who are interested in making changes instead of just ingesting medication, there is a mountain of supporting evidence that many Chronic conditions can be effectively treated if not reversed, with the guidance of a caring doctor who is not so hasty to write a script and maximise their Medicare billings.

My wife has had Thyroid issues which have been effectively managed through natural medicine.

My son had attention issues at school and the teacher wanted him to be assessed for ADHD before meeting with our IM Doctor. Our doctor requested a variety of testing which found his copper was high. He started a course of compounded medication to increase Zinc combined with a Gluten Free diet and we saw amazing results. Very good attention in school, no longer silly in class, very settled and organised. The teacher was very impressed with his progress. We never did tell her we did it naturally.....

So I guess what I am saying is, there will always be a large populis who want quick, cheap (free) medical advice who are only wanting medication as a fix, but there will also be another populis who is **willing to invest in testing and investigation, value comprehensive medical advice, would prefer to exhaust natural options where available and employ lifestyle changes under the care and supervision of an IM Doctor.** I would implore you to tread very carefully with these very skilled doctors who are already feeling beaten up, as it would certainly be a dark day in the field of medicine when they are restricted from providing the quality of care we have become accustomed to.

In the consultation paper, there was reference to IM Doctors having sufficient training. In this process, will you make it known who the Medical Board recommend for training in Complementary and Unconventional Medicine? Would ACNEM be the gold standard?

Option 1 would be my preference as I would be saddened to hear that mass changes are made for the sake of a few. IM Doctors make the same Hippocratic oath. They should not be segregated for investing their time and efforts in further study that lead to improvements in patient care.

I appreciate you taking the time to read and consider my experiences with IM Doctors and that my experiences aid to cast some light on very positive patient outcomes, not just the negative.

Kind regards

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 27 June 2019 7:53 PM  
**To:** medboardconsultation  
**Subject:** Keep Integrative Medicine As Is

Hello Medical Board,

I choose Option 1: "no new regulations are required for doctors practicing in the areas of complementary medicine and integrative medicine."

I have chosen to continue with Integrative Medicine doctors because of the following:

I am writing to you for acknowledgement of how much of a bad idea it is to eliminate integrative medicine from the medical profession. My friend suffers from many illnesses which have led her to slowly wither away when only using conventional medicines by regular doctors.

Ever since seeing integrative doctors that can provide her with the right medications to help her get through life, she has been able to cope a whole lot better and seeing at least some improvements.

Without the integrative doctor she has been seeing over the past few years she would have never been told about a severe mold and toxin issue that had plagued her previous household which was slowly eating away at her health and essentially killing herself off slowly.

In the past she had been seeing regular doctors, who either did not know what she was going through, or exactly what conditions she had, which in terms either provided her with useless medication or medications that make her conditions worse.

Because of these methods in past that did not help her, she had to turn to researching things herself on how to get better as the doctors and hospitals could not help.

As soon as she started to see her integrative doctor her life was suddenly changed for the better.

The doctor would see what she was going through, could provide some answers to questions she has had unanswered for many years, and also providing her with medications and advice that actually works and gives her life again.

My friend used to be able to work a job and attend university around the age of 20. Ever since getting sick she has not been able to do these type of things anymore, and the only ray of hope to seeing these things come back into lifestyle and contribute more to society was from seeing her specialized doctor.

Removing these types of doctors and medications will only hurt people like my friend even more.

I could not bear to think of what might happen to my friend if she could not get the proper support she needs. Her and many others are pleading for things to stay the way they are so everyone can get the deserved support they need in extremely tough times through life. Please do not turn your backs on these people as they are the backbone to all of society and are living human beings that deserve better than this.

Thank you,

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 3:04 PM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

Dear Sir/Madam,

I am making a submission to the public consultation on complementary and unconventional medicine and emerging treatments. I believe Option 1 is the best choice.

I am someone who has suffered from ME/CFS for all my adult life, now over 30 years. As you know, there is no treatment and no cure for this disease, only pacing and treatments/therapies that manage the symptoms, treat the secondary conditions (such as insulin resistance) and support the body.

During the time that I have suffered from this disease, which has been severely disabling, resulting in my necessary withdrawal from a PhD in Applied Mathematics, and 10 years been unable to work or study after that, I have had no 'conventional' medicine that has helped my state of health, but have gained much benefit from a number of therapies you have described as falling under your definition of complementary and unconventional medicine.

Most vitally, I received long-term antibiotic therapy for Mycoplasma species infections, which led to my health improving from being unable to work or study at all to being able to study and re-train as a massage therapist (part-time study) and then work (part-time) as a massage therapist and lecturer in Health Sciences for massage at the school at which I had trained.

Similarly, I received long-term intravenous vitamin therapy some 10 years after this, after a serious relapse which resulted in 2.5 weeks in hospital and development of tachycardia, which led to me improving from being almost bed-bound, with my mother moving in to look after me, to being once again able to live independently (with HACC services and delivered meals). Although I have not yet been able to resume any work or study, I fervently hope that further 'unconventional' treatments may make this possible in the future.

These are the two most important treatments of this kind that I have received, but I have also received many other vitamin, mineral and herbal medications.

I receive these treatments from an integrative medicine doctor (actually a number of them over the years, as it has been over 30 years as I have said), with proper testing of vitamin and mineral levels, regular liver and kidney function testing and so on. The Mycoplasma infection was diagnosed from a pathogen test. All these treatments have been carried out in a safe and professional manner, and have led not only to a major improvement in the quality of my life, but a reduction in the burden on the tax system, as there were significantly fewer years needing disability support pension than there would have been, and significantly fewer services needed to be provided (through HACC or NDIS).

If Option 2 goes ahead, I fear that these treatments will be restricted or no longer available at all. Although the guidelines claim that existing treatments would not be affected, it is clear from the document eg the section on Lyme-like illness, that a number of treatments that are supported by research and tests are being claimed to be false by conventional medical practitioners. The clear aim of these guidelines is to shut down treatments which those practitioners believe to be false, untrue or dangerous, even though there is much evidence that this is not so. Under these conditions, it is foolish to claim that there will be minimal impact to the treatments currently being given if these new guidelines go ahead.

The current guidelines and standards make all the provision that is needed for any actual misconduct, harm or adverse effects to patients and so on. The only need for further guidelines would be to stop treatments that are in fact not causing harm to occur.

However Option 2 would in fact cause harm to patients, by restricting patients' access to treatments that improve their health, as well as impact the wider society through the need for more support and services for more, sicker, patients.

For all these reasons, I strongly urge you to choose Option 1, to not amend or add further guidelines regarding these treatments.

Yours sincerely,

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**From:** [REDACTED]  
**Sent:** Saturday, 29 June 2019 12:45 PM  
**To:** medboardconsultation  
**Subject:** 'Public consultation on complementary and unconventional medicine and emerging treatments'

To whom it may concern,

My name is [REDACTED], and I am writing this submission as 1) A former Registered Nurse, 2) A patient, 3) A mother, and 4) A sister.

1. I was a registered nurse for approximately 25 years, the last 15 years of my career were spent in theatre, specialising in anaesthetics. In those years I saw everything from the noble doctors who have a heart of gold and only ever want the very best for their patients, and I saw the very worst of our medical system where people are treated like they don't matter, where mistakes are covered up and unexplained deaths got issued a death certificate without autopsy despite the fact that the patients had medical procedures less than 24 hours before or involved in drug errors.

One such example was a patient who had been prescribed 320mg of Vancomycin QID. No levels had been taken and despite the fact that this is a toxic dose, it had been given to the patient for 3 days by multiple people until I came on duty and reported the error. That patient died a couple of days later - there was no investigation. Then there was the time that a patient had a PEG inserted yet died within 24 hours of the procedure. I've laid out close to 40 bodies and none of them ever had their stomach begin to balloon and fill up with gas within minutes of passing. There was no investigation into this death either.

Then there are all the times when in theatre we have a little oops occur. Sometimes it results in death, other times it just means that the patient suffers. Where is AHPRA then? Nowhere to be seen. Let's take a closer look at C sections:

WHO have set the rate of true medically needed C sections to be at 10%, but in WA the rate is at 40%, yet we know that vaginal birth is less risky and causes less harm. Further more, the pressure placed on a baby's head during a routine forceps delivery via C section is 3/4 of the pressure required to decapitate a baby's head. I have personally witnessed a particular obstetrician place his very dirty boot, up on the operating table to provide him with leverage as he pulls on the forceps around an infants head. (I am more than happy to provide you with his name and practice details as this was his standard way of performing a C section. Last time I checked this was not a researched based decision and most certainly not safe.) Thirdly, obstetricians have the highest insurance of any other health care professional, and they have to keep that insurance after they retire up until the last baby they delivered turns 18. Fourthly, 40 out of every 1000 births (in Australia) the infant is harmed by the delivery and the Ob is considered to be responsible for that harm.

Maybe AHPRA should be investigating the current practices of what is considered to be conventional medicine and openly sanctioned by AHPRA. Maybe we should video tape a C Section being performed and post that for the public to see. Because what goes on behind closed doors in theatre would terrify most people and if they knew the truth, it would have them turn away from having operations.

Let's look a little bit further. There currently is no evidence for having a knee arthroscopy. In fact in the NHS it is no longer covered as it has been found to be a placebo. However here in Australia we still perform this operation daily. It comes at a risk, yet AHPRA doesn't intervene. I even showed the studies to an orthopaedic surgeon and talked about the lack of evidence to support this operation; his answer was: "That is very interesting, however I'm a business man and that is my bread and butter." A very honest answer, yet it highlights the complete lack of evidence based practice by surgeons here in Australia.

To be completely honest there is a very long history in theatre of surgeries simply being “invented” by a surgeon, who then performs that surgery and waits to see what the outcome is. If it appears to work, it’s adopted as a cool new surgery and the surgeon goes away patting himself/herself on the back. A classic example of this from the history of medicine is the removal of the thyroid gland along with the parathyroid glands - oops people died, sorry about that! Now we don’t take the parathyroid glands out. Robot surgery is the same nonsense. It’s still humans doing the surgery via the robot. It’s not as if a computer program does that independently of the surgeons, but of course we don’t explain that to the patients. And whilst we are talking about informed consent, let’s all be honest about the fact that medical consent here in WA is simply whatever information your doctors think you need to know in order to make a positive decision. Not the whole truth, just enough to make sure you agree to the surgery/drug/treatment. Unless the patient asks a specific question, then they are not required to give that information to the patient. Yet it is the patient that has to live with those choices - not the doctor and certainly not the Medical Board.

These are practices that have been going on for years and years. There is virtually no evidence based practice within theatre. There is a growing body of evidence that most orthopaedic surgeries (not trauma) are simply placebo and the risks associated with these placebo procedures are huge. Every anaesthetic is a potential death, there is a risk associated and it’s not something to be taken lightly. There is a risk of wound infection, something that can be devastating and can even result in death. Yet AHPRA doesn’t bother to investigate that. Instead they carry on about other professions needing to be evidence based and then turn a blind eye to this huge area with almost no evidence. It’s only after harm has been done that a procedure is changed.

Then there is that little something called iatrogenic deaths - currently the 3rd leading cause of death in the Western World, but nobody ever talks about that one. There is no public disclosure and there is no outcry of outrage by the Medical Board or AHPRA; it’s simply swept under the carpet and everybody pretends like it isn’t true. The process for approving drugs here in Australia (and the world for that matter) is a joke. As long as it’s already been approved in the US and Europe (where the pharmaceutical industry does all the testing meaning that there is NO independent research being done), it’s an automatic approval here in Australia. That’s like asking a fox to look after a chicken farm. The public is experimented on and often they die. [REDACTED] killed over 180,000 people before it was finally removed from the market, all the while the pharmaceutical company knew that it caused heart attacks, they were even fined for their error. But yet they keep going. Billions is paid out yearly for false advertising, bribing Medical Doctors, knowingly causing harm and yet there is no public shaming, outcry or investigation - why is that? Let’s look at the approval of medical devices, it’s even worse than drugs. It’s a rubber stamp process and then when things go wrong ([REDACTED] hip replacement and Mesh repairs for vaginal prolapse are just 2 recent examples of class action suits.), it’s just an oops and too bad for the patients. The patients then have to band together and form a class action for them to get any compensation, whilst they live in pain and suffering. What ever happened to the creed of first do no harm?

Most daring of all was the review by the Chief editor of the Cochran Medical Journey in 2015, that found on average it takes 20 years from when something is known before the average doctor at the coalface has that information. So that means when I access medical advice the information I am being given is on average 20 years old. There is so much “research” being produced that even if an individual doctor wanted to make sure they were up to date on the latest research then they would not be able to practice because of all the time it would take to read through the research. To complicate matters more a lot of the important research is hidden from view. Such as the efficacy of antidepressants. A pharmaceutical company may do some research, but any that does not favour their drugs is efficiently buried and glossed over. So a doctor who wants to find the best option for their patient is doing so from a distorted place, and when the distortion comes from the source, it is impossible for that doctor to practice from a true evidence based point of view.

Which finally brings me to the growing group of medical doctors who see the system for the very broken mess that it is. In my 25 years of nursing I met a very few individual doctors who did not care about their patients, the vast majority (95%) had an absolute heart of gold. They only want the very best for their patients and they are crushed when their patients suffer or die. I’ve been part of more medical emergencies than I ever care to remember and at each one of them I fought along side some of the most amazing, intelligent, compassionate and talented doctors and other health care professionals. Those of us who are called to the healing arts, do so out of a soul deep desire to help alleviate the suffering of our fellow mankind, we didn’t come into the profession to cause harm. THE SYSTEM IS BROKEN!!! And that is what the Medical Board should be concerned about. If I had a dollar for every time a patient asked their doctor a question about their disease/illness the answer more often than not would be “I don’t know”, I would literally be a multimillionaire. Because truth be told the old model of health where we separate the mind from the body is false, it is causing harm and it is unsustainable. The current system of health care is broken, it is failing the people and we as a population are getting sicker and sicker. We the people in the inside know this to be true, some stay and fight hoping they can make it better and others escape with their soul in tatters. Broken humans who realise that they cannot change the system and they can no longer be part of perpetuating such a broken system.

2. In 1985, I developed pains in my stomach. I was 15 years old at the time and nobody took this pain seriously. The pain continued as the year went on and reluctantly my GP referred me to [REDACTED] for a review of my stomach pain. The doctor I saw didn’t believe me and simply wrote “Psycho-somatic hysterical teenager” and then a female symbol. Dismissed me as crazy and then began to put me through a long and very distressing process which includes multiple

blood tests and fun things like a barium meal x-ray. I should mention that everywhere I went my medical notes followed me and I was treated like crap. Approximately 6 months into this bullshit process I was finally given an endoscopy where it was discovered that I was not lying, not crazy and in fact had 6 duodenal ulcers, 2 of which were partially perforated. A few more months of the prescribed Asprin and I would have been in hospital with a complete ruptured ulcer. It was only at this point that I was given decent care. Suddenly I was given kindness and compassion, and appropriate treatment.

My treatment consisted of pharmaceuticals, which only worked temporarily, once healed the medication was discontinued and the ulcers would re-appear. It's called not getting to the underlying cause of the problem. I went through this cycle multiple times over the course of 18 months at which point I asked for a permanent solution. I'd read the package inserts of the medications I was being given and I knew that the long term side effects was damage to my liver and kidney's and I wasn't that keen on killing my body with the use of drugs. I was given the option of surgery - A highly selective Vagotomy. You many have heard of this procedure, you may not. Once upon a time it was considered the gold standard in the treatment of stomach and duodenal ulcers. It's no longer being done because it's now been found that Helico bacteria is the number one cause of stomach ulcers; something that wasn't "known" in 1987 when I had my surgery. (Ironically it was in 1987 that Dr Barry Marshall ingested a mixture containing the Helicobacter bacteria and gave himself an ulcer which he then healed using antibiotics. It took 20 years for his research to be taken seriously and finally accepted as truth!)

As is often the case there was a little oops in theatre and what should have been a partial severing of my vagal nerve in the stomach, ended up being a complete cut and I ended up with a total vagotomy. Now the reason they had changed from doing total vagotomies to the highly selective, is because that it has been discovered that a total vagotomy causes long term digestive issues such as gastric dumping and rebound diarrhoea. Guess what I've had to live with for more than 30 years as a result of this little surgical oops? Of course nobody explained this to me post surgery. In fact if you try to request my medical file from [REDACTED] you'll find they magically "lost" my medical file very shortly after I filed a complaint against a doctor for failing to give me an anaesthetic and then going ahead and performing an endoscopy on me whilst I struggled to get out of the procedure - but that's another story in itself. It does however highlight that as a patient on the receiving end of the medical system, it is painful. The suffering is real and it goes on for years.

This medical procedure is now defunct and rarely if ever performed. It has taken me years to undo the damage of that one decision. Had I been given full disclosure of information I would NOT have chosen to have the operation. If the process of inventing surgery was truly evidence based then I would never have had to suffer from a horrible surgery that not only destroyed my digestion, it adversely affected my ability to absorb nutrients, I became deficient in Vitamin B12, iron, potassium, selenium, magnesium and a host of other bio markers were adversely affected. I have struggled with my health ever since. I've been trying to heal my body and have some sort of health for nearly 15 years now, and I am thrilled to say that I have managed to do so despite the very best attempts of the Medical Board, AHPRA, Friends of science in medicine and the pharmaceutical industry making it increasingly harder to access "real" health care.

I used a naturopath to help me heal my gut. She changed my diet to exclude gluten and dairy for an extended period to reduce the inflammatory process in my gut. She increased my intake of fibre, raw foods, healthy fats and lean meats. She reduced my consumption of refined sugars and stimulants like caffeine. I got better. Even if your sceptical heart says that it was only placebo, it was NOT harmful. I will still go and see her if I feel that my digestion is a little off.

I used a chiropractor. After 20 odd years of nursing my back was in a mess. I had back pain from the top of my spine to the bottom of my spine and I was in pain everyday. (I should mentioned that due to my witnessing the horror of prescription drug addiction to pain killers and the complete lack of evidence for surgery meant that I refused either of those options.) I was also terrified of chiropractors because when you are brought up in the medical system, you are taught to be afraid of them based on lies and fear. I'm now pain free and I believe that it has been a main contributor to me being able to recover my health. Again even if you are crying that it is only placebo - it caused no harm unlike the pharmaceuticals for back pain, which cause addiction. If I am going to be addicted to anything I'd prefer it to be chiropractic care. I still see a chiropractor regularly for maintenance care as it makes me feel better and prevention is so much better than chasing a cure around.

I used a kinesiologist to help me heal from the trauma of life and to find balance in my heart. It caused me no harm unlike if I was stupid enough to take anti depressants which have a documented history of causing 2/3rds of all users to attempt suicide. I will still have this treatment as life is beautiful and it's can be a little rough around the edges. When we don't take the time to care for ourselves, that is when our health begins to falter.

I used a Doctor of Chinese medicine to help me with my hay fever and chest infections. I have a few acupuncture needles, some cupping and Chinese herbs. Again it causes me no harm and I feel so much better. I've not had any



symptoms of hay fever for 10 years now and when I get a cold, cough or chest infection I go back because I know that it works for my body.

And last but not least I finally found a compassionate, kind, caring, honest holistic and integrative GP. Someone who has bothered to be at the latest of the latest research into gut health, healing and holistic care. Who is not driven by her ego and is more than happy to collaborate with other health care providers for the best outcome of her patients. My initial appointment was for an hour where I was given the most extensive medical examination that I have ever experienced. She was able to unravel the mess that was my medical history, my symptoms and diseases. She used diet, natural supplements, compounding medication to increase the ability of my body to absorb vital minerals like potassium and selenium. She diagnosed my heavy metal toxicity (toxic levels of lead, mercury and aluminium), she helped my thyroid recover and my Hashimoto's is now very firmly in remission. She prescribed meditation, self care and dietary changes. She encouraged me to explore what was going on for me metaphysically and to heal the underlying emotional traumas. Again NO HARM WAS DONE and healing occurred.

As the recipient of the health care I am the one that has to live with the outcome of the treatment. I have to live with the side effects of ill thought out surgeries and processes beyond my control. I have to live with the side effects of the medication prescribed, I have to live with the health that my body has because I have to live in my body. In my experience it is typically arrogant of a doctor (AKA the Medical Board and AHPRA) to assume that they know best and that the public is too stupid to make informed decisions. How dare you really, where exactly do you get off making that kind of choice? Are you going to be there when your patients life goes to shit because you stuffed up? Nope, the patient has to live in their body and they are the ones that suffer.

3. When my daughter was 13 she developed appendicitis, and she had to have her appendix removed - no issue there. Except that in the years that followed she developed increasing pain each month during her period and within a year she was doubled over in pain each month with nausea, vomiting and diarrhoea. I consulted multiple GP's. Each time we were given no explanation, she had ZERO medical investigations. Instead we were told it's normal, it's going to go away once she has a baby (very useful advice for a 14 year old girl) or that she should simply go on the oral contraceptive pill (what the actual F\*\*\*?). For nearly 10 years I watched her suffering helpless to do anything about it. We tried all the alternative things and with only limited success. After one particularly painful and traumatic period I began a frantic search for a holistic GP. She was the first doctor to listen to her. She was given a ton of tests and medical investigations and finally given the diagnosis of endometriosis. I'd like to have you realise that it took almost 10 years for someone to do any investigation and diagnose her condition. This is a disgrace. What kind of a system is it that you are trying to defend. One where young girls are unimportant, their suffering is something to laugh at behind closed doors or simply to ignore as if their lives mean nothing?

Our amazing holistic GP prescribed, yoga, meditation, kinesiology, referral to see a doctor of TCM, herbs, supplements (compounded) and then monitoring her. I'm proud and very excited to tell you that she's now healed, as confirmed via a diagnostic laparoscopy. She had endometriosis and now it's in remission. Her fertility has been restored, she's no longer in pain, she's no longer lying on the bathroom floor crying, vomiting and having diarrhoea for 3 days every month. Something that the current medical model didn't achieve, didn't offer and didn't even care enough about her to try to help. And you are wanting to take away this kind of access to real health care? Once again what happened to no causing harm. Thank God we went alternative, thank God that people like her doctor are available to the public where real health is on offer and real healing is able to occur.

My son is an amazing cricketer, and lived for his sport. In November 2016 he was injured whilst playing his favourite game. A spectacular dive for the boundary line to try and stop a 4 resulted in him colliding head first with a concrete pole of the pavilion close to the boundary line. This was one of many previous head traumas, except this time it was really serious. I watch everything that made my son, my son disappear over the space of 3 hours in an emergency room. His symptoms included: Partial loss of vision in his left eye, blurred vision, loss of balance and co-ordination, mild apraxia, dyspraxia, short term memory loss, changes in his voice, changes in his personality, obsessive thoughts, suicidal ideation, depression, head aches, digestive issues, and an inability to do basic maths like basic addition. He went from a happy, outgoing, fun loving young man with a bright cricket career to a crying miserable mess that could barely function.

He was discharged home within a few hours of attending the emergency department and getting 6 stitches in the back of his head.

The medical system has no treatment for this type of injury other than pain killers and anti depressants. Can you please point to the medical literature where it shows that this is a curative treatment option for head trauma? Because it's not a cure, it's a bandaid at best.

After 3 days of watching my son suffering I tried to find a neurologist that would see him and see if they could help. There was a 3 month waiting list and everywhere I rang I was told that this simply was not something that anyone

could help me with and that we just had to hope it would get better by itself - excuse me? Again [REDACTED]? What kind of system is this, where we watch a young man's life be destroyed and just go "Oh well, too bad"????

Refusing to give up on my son, I took him to see a functional neurologist. He had a qEEG performed and he commenced treatment in the latest of the latest of functional neurology. Progress was initially slow, however I am thrilled to say that not only do I still have my son here (because he did not kill himself - please check out the movie Concussion which is based on the very true story of American Football), but he is 100% better. His eye sight is back to normal, he is balance and co-ordination is back to being amazing, his reflexes are back to being lightening fast, his speech is normal, his voice is normal, and he's a human calculator. He also flew to England 6 months after his head injury and played cricket for 6 months before returning to Australia for the Aussie cricket season. He may have missed out on selection of the under 18's WA squad, however he still has a shot at making it to the top. Something that simply would not have happened if we have not gone for alternative care.

His head injury also affected his gut health and his overall health. He was unable to put on weight and had major mitochondrial malfunction. He was short of breath, unable to exercise without vomiting and we consulted the same holistic GP who was the behind the healing my own Hashimoto's and my daughters endometriosis. Again we were given outstanding treatment, compassion, understanding and she went out of her way to do research, to listen and to keep working with him until his health was restored.

You as the Medical Board and AHPRA have a duty of care to protect the public from harm, so stop picking on those few individual who are making a real difference in peoples lives, stop picking on those who ofer real solutions, who are trying to get their patients well and off their drugs. Those true heroes who follow the creed "First do no harm", who practice true evidence based care by remembering that the 3 pillars of EBP includes what the patient wants. If you really care about the public and preventing harm, then stop killing people with drugs and surgery that have no evidence behind them, or pitiful and poorly performed research. We the people that you "practice" on are not your personal property, we do not belong to the state and we are not your crash test dummies that you can simply throw on the scrapheap of society when you are done playing God.

4. For my last story, I'd like to share a case of what happens to those poor fools that don't have the knowledge or ability to challenge the system that you want to defend; a story of what happens when a member of the public blindly believes in the medical system.

My sister was put on the oral contraceptive pill at the age of 15 - she stayed on it for more than 40 years. Many medical doctors failed to warn her of the long term side effects like the slow leaching of Vitamin B group and essential nutrients like selenium, not to mention the incredible damage done to her endocrine system over the many years.

When she developed symptoms of "menopause" she was promptly put on more drugs, and then when they didn't work more drugs were prescribed. There where no real tests performed, at no stage did she get any real solutions. Slowly her health deteriorated and she kept going to see her doctor who would simple change her anti depressants and other psychotropic drugs around like it was nothing. I watch in horror as her health continued to deteriorate. Last year she became so low in potassium that she collapsed and by luck her husband returned home just in time to call an ambulance and get her to ICU where she had to stay for nearly a week whilst they corrected her electrolyte balance. They labelled her as an alcoholic and dismissed her from care. Back home her mental and physical health continued to deteriorate.

She's now so sick I expect a phone call any day to let me know that she has died. For nearly 20 years I have tried to tell her that the choices she is making in her heath were not going to ever give her the option of living a healthy life free from pain and suffering; she staunchly continued to refuse my help and refused to seek out alternative health care. It is only now that she has started to see the current medical model for what it is - evil. It is pure and unadulterated evil. The system does not create cures, it creates repeat customers as people are told "We don't know why you are sick with this disease, we don't know how to cure it, we just know that you should have this untested and non-evidence surgical procedure and take this drugs with horrible side effects and that's just your lot in life now."

You all parade around with masks on hiding behind your boards and government organisations, taking cheap shots at the healing professions that have so much to offer in collaboration with the medical industry. You go home to your families and sleep well at night without any regard or a moments thought about all the people you harmed through your policies and constant persecution of those individuals who only want to help people recover from their chronic illness. You turn a blind eye to all the harm that the current health care model causes, you lie to the public and deny us access to information that would allow us to make a true informed decisions about what we want to put in our bodies and what we want done to our bodes, You ram poisons down our throats and they run away when those treatments cause harm and death. In short the Medical Board of Australia and AHPRA are psychopathic organisations, because you knowingly cause harm and you don't care about your victims. You show ZERO remorse for the harm done and lie to protect yourselves. It's a disgrace. To make matters worse, you actively and violently pursue those who dare to stand up and say the system is broken. My very wonderful, compassionate and intelligent

holistic GP is worth a million of you and I will defend her right to practice in a holistic way till the day I die, because the other alternative is an option that my soul cannot live with.

The Medical Board, AHPRA, TGA, and the Australian government are amoral organisations, divorced from any form of spirituality, yet those you serve are inherently spiritual beings. Humans are not robots, they are spiritual beings. Even those who cling to science are still clinging to an ideology, and the truth is the causality as it always is with any fanatical dogmatic group. This review is a sham, and it's only purpose to to prevent the public from accessing health and healing.

Kind regards

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**From:** [REDACTED]  
**Sent:** Friday, 12 April 2019 3:22 PM  
**To:** medboardconsultation  
**Subject:** FW: 'Public consultation on complementary and unconventional medicine and emerging treatments'

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**From:** [REDACTED]  
**Sent:** Wednesday, 10 April 2019 11:31 AM  
**To:** communications <communications@ahpra.gov.au>  
**Subject:** 'Public consultation on complementary and unconventional medicine and emerging treatments'

I have followed a clue from Australian Skeptics that you will accept submissions from the public, and the PDF of the Medical Board of Australia offers the avenue of e-mail, but doesn't seem to offer any e-mail address. Following "contact" links on the web site takes me to AHPRA, so I trust that you will accept my submission for the Medical Board.

I have no medical training, but served as [REDACTED] some 30 years ago for what was then the [REDACTED] natural therapies "college" in Australia. There were acupuncturists who had been trained by [REDACTED], a Chinese supposed "master". The only relative qualification of the proprietor was a diploma he gained from the same college he then became owner of. He did recognise that it would be good to have a qualified doctor on staff, so he employed one for one lecture a week, but that doctor tended to treat the whole exercise as a bit of a joke.

The staff constantly promoted their various modalities (including Homeopathy) by telling students how well patients felt after treatment. There was no actual validation by anything which could be recognised as scientific.

The proprietor often had burly [REDACTED] "students" turn up at the door and pay him for a term's tuition in cash, and then never attended one lecture. Just disappeared. He would put off the many enquiries by Immigration Department by treating it as "their problem". I left before two years was up. Fortunately, as it turns out, because a few years later the proprietor [REDACTED]

During this time and for many years, I used a medical practitioner who I think had Seventh Day Adventist leanings, and who was always keen to promote "alternative medicine" as against "Western Medicine". E.g. when I complained of a recurring cough with phlegm, he simply responded – "of course – just stop having dairy". (In years since, I have been diagnosed with emphysema due to 13 years of smoking many years earlier). As a treatment for rising

cholesterol, he simply told me to have at least 20 almonds a day. Nothing wrong with that, but it demonstrates that his first instinct was toward “alternatives” rather than standard clinical advice, with the potential that underlying realities might be missed.

About 17 years ago I was having trouble with frequent urination, and complained many times to him. He referred me to a specialist for what he said after digital examination was a slightly enlarged prostate. Both he and the specialist suggested it was unlikely to be sinister, but they would both “keep an eye on me”. Three years later, after I had complained three more times within the third year, I was referred back to the specialist, who declared me needing dialysis urgently. To obviate this, he performed a robotic TURP procedure. This has left me with an atonic bladder and obstructive uropathy, requiring me to manually catheterise myself two or three times a day for the rest of my life.

You will not be surprised to learn that I believe that doctors, and especially people lacking the qualifications to be medical practitioners should be prohibited by law from using terms like “alternative” (implying that their alternatives are therapeutic) or “medical” (which my dictionary says relates to actual healing). Or “complimentary” as though they are valid and helpful. They should be required to display posters telling people that their modality or treatment has in fact no scientifically verified validity.

Sincerely,

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**From:** [REDACTED]  
**Sent:** Friday, 5 April 2019 1:05 PM  
**To:** medboardconsultation  
**Subject:** concern about further regulation of complementary medicine and treatments

To Whom it may concern,

I am writing regarding the public consultation on clearer regulation of medical practitioners who provide complementary and emerging treatments.

I suffered with severe menopause symptoms for years and found conventional medical doctors could not successfully treat my concerns and bring me to a satisfactory level of health. Pharmaceuticals and the use of conventional methods simply did not work and delivered unwanted side-effects. I believe most of them are a total waste of Medicare funds and resources.

It has only been since I saw an integrative medical doctor who included lifestyle change, diet and supplements of vitamins and minerals, and bio identical hormone therapy to address my problems that the problem I had suffered with simply disappeared within days.

If I cannot see an integrative doctor, or my doctor is restricted in what he or she is able to prescribe for me, I know my health will deteriorate and have a continuing impact on my family and my wellbeing.

Furthermore, I am being forced to drop out of private health cover since the government has stopped allowing natural therapists. It is simply no longer worth my while to stay in private health without being able to claim for Natural Therapies.

Integrative medical doctors, chiropractors, qualified naturopaths have kept myself and my family in good health my whole life.

I greatly object that my right to the health care of my choice is under threat.

Yours sincerely

[REDACTED]  
4/5/2019

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**From:** [REDACTED]  
**Sent:** Tuesday, 30 April 2019 4:48 PM  
**To:** medboardconsultation  
**Subject:** I demand Option 1 - We need our integrative doctors!

I am blessed to have a wonderful doctor (She is an ACNEM trained integrative GP). Without her help, I would still be using steroid creams to treat eczema I have suffered from on my legs for the past 2 years. She is the only doctor to have been able to get to the root cause of these symptoms and I am now free from horrible rashes and itchiness.

I do not want her to be restricted in her practice. I demand Option 1.  
Please do not take away a person's right to choose their own health care.

Thank you

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 11 April 2019 5:13 PM  
**To:** medboardconsultation  
**Subject:** Complimentary & Unconventional & Emerging Medicine

To Whom It May Concern;

I am writing in support of medical doctors who work in the areas of Complimentary & Unconventional & Emerging Medicine. I have been dealing with a severe decline in my health since 2013. My professional background is that of a Mental Health Social Worker. Since 1990 I have run a busy full-time therapy practice specialising in Trauma Resolution Therapy, until the severity of my health crisis resulted in me having to cease work in order to survive, as it was becoming clear that I was well on my way to dying.

Conventional Western medicine/doctors were unable to offer me a diagnosis nor were they able to assist with any treatments to improve my health. Thanks to the genius of medical doctors who think both within and outside of the constraints of Western medicine, I have finally been diagnosed with Bartonella Henselae and Lyme-Like Disease. I am aware that the Lyme-Like Disease remains a controversial diagnosis, however I have pathology to support my diagnosis. I was recently commenced on antibiotics and I have noticed a rapid improvement on all of my health measures.

I am unable to return to work due to the severity and unpredictability of my illness symptoms and as such I have had a massive reduction in income and I now rely on Income Protection which ceases at age 65. I am currently 58yo. My outgoings to pay for medicals most months is anywhere between \$1000-\$2000. There are implications of an increase in costs if non-PBS "medicines" are required as a substitution for pharmaceuticals such as antibiotics. If the doctors practicing Complimentary & Unconventional & Emerging Medicine are forced to cease prescribing medicines for medium to long-term use, such a decision will jeopardise my health and the health of thousands of Australians living with illnesses that are to date, beyond the level of competence of Western medicine to treat.

In summary, I implore the Medical Board to cease being Flat Earthers and to realise that medicine has not yet developed whereby it can heal all Australians citizens who are living with "non-conventional" illnesses. Medicine is a constantly developing science and its through the courage of adventurous thinkers, that we maintain a momentum moving the human species forward. If the brave doctors of medicine never looked beyond the "known" wisdom of the times, we would never have moved beyond the use of leeches and living in caves! I remind the Board of the fairly recent discovery of the role of Fish Oil (omegas) in helping maintain human cardiac and mental health.

Thank you for your consideration of my concerns.

Yours Sincerely  
[REDACTED]



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**From:** [REDACTED]  
**Sent:** Wednesday, 26 June 2019 8:12 AM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

I am forwarding the below submission in relation to the above topic. I support Option 1 as described by the MBA – ***Retain the status quo of providing general guidance about the Board's expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board's approved code of conduct.***

To see that the proposed changes to regulations have been put forward by the MBA without prior consultation with relevant stakeholders, such as representatives of medical colleges, and or academics in the fields of Integrative Medicine is concerning. Further, the "stakeholders" and/or concerns raised have not been identified. Consultation is paramount on such an important issue, that affects what Australians want in relation to their health options. There is no credibility for the proposed regulations without consultation with experts in their field. Some of the concerns regarding the proposed regulations are:-

- There is a current Code of Practice that addresses all safety and efficacy issues related to Integrative Medicine, no need for more guidelines
- Restriction of consumer choice outside "conventional" medical practice
- Failure to consult with stakeholders and state in the development of the regulations
- Failure to identify significant concerns about safety of Integrative Medicine or risk to the public

Qualified doctors who have adopted integrated medicine into their everyday practice should be congratulated in their open-minded approach towards their patients, for which pharmaceuticals have not produced the desired result. Sometimes, it is simply a change of lifestyle, eg simply what we eat. It is well known that many doctors over-subscribe pharmaceuticals.

It is neither fair nor effective to sanction doctors who use safe and effective Integrative Medicine in their day-to-day medical practice by imposing a new set of guidelines on their practice. Why complicate it with a two-tier medical system, ie, different guidelines for conventional and complementary medicine. One set of good practice guidelines is all that is required for all doctors.

Integrative medical doctors can combine the best of conventional and complementary medicine into clinical practice.

Take this example. A friend of mine suffers from "chronic fatigue syndrome". After visiting around six doctors to try to get some help for her debilitating condition, she found a doctor who was willing to propose an alternative treatment. While the treatment took time, and it didn't cure the condition, it allowed my friend to function much better on a daily basis and manage her condition! The doctors who she had visited previously either did not take her condition seriously, could not suggest a treatment, or more importantly didn't believe it was a genuine condition. Conventional doctors, mostly, do not have training in nutrition. Sometimes, it is just a matter of changing your lifestyle and diet. In this case, conventional medicine failed my friend.

It is interesting to note that one third of Australian GPs practise some aspect of complementary medicine within their practice. Surely this is a testament to the success of alternative options where it is considered by the GP to be safe and effective.

In closing, there is no suggestion that conventional medicine should be abandoned. But surely both conventional and complementary medicine can be used together. No-one is doubting the value and effectiveness of pharmaceuticals, of course they are necessary for many conditions, but not for all conditions.

More importantly, the adoption of more regulations will severely limit Australians' freedom of choice for their health care.

Regards

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Tuesday, 25 June 2019 4:56 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

Dear Med Board,

I have chosen to see Integrative Medicine for mine and my family's health because:

I want to be involved in my own and my family's care and this requires time in consultations an additional medical training that I found in my integrative medicine doctor.

Conventional medicine provided no answers about why I was sick and I needed medical care with a wider range of diagnostic and treatment options.

I had been sick for 3 years with chronic fatigue and received no answers or help from my GP. It was only through a nutritional doctor did i find help to restore my own health. I have also had great success using complementary therapies such as chiropractic care, acupuncture and homeopathy to deal with many acute illnesses for myself and my daughter.

I also suffered for 28 yrs with extreme eczema that was never well managed with cortisone creams- it always came back. This issue was extremely debilitating- leading to bouts of suicidal thoughts because of the pain and itch.

It was finally Homeopathy and Natural remedies of diet and stress management that gave me my life back. Conventional medicine had been No help to me for 28yrs. That's certainly something- if not for natural therapies- i many not be alive- and definately would not have the quality of life i have now if it was not for Complementary therapies.

I prefer non-drug approaches for managing my family's and my own health or illnesses.

I am happy with my GP for simple treatments within brief consultations, but I want to go further with prevention and a deeper understanding of what I can do for myself and my family. My integrative medicine doctor provides me the time and knowledge to do that.

I want more from my doctor. More time. More understanding of causes of illness. More power to understand the ways in which I can improve my health to reduce my need for drugs, surgery and medical appointments. My Integrative Medicine doctor provides these for me in a way that 10 minute consultations with doctors cannot.

I find that conventional medicines have short duration of action and do not address the underlying causes of disease. They also do not offer any solutions in terms of preventative health care and enhancing my health for optimal wellbeing.

Doctors can only help when someone is already sick. Complementary therapies offer support to people who wish to experience peak health-for life.

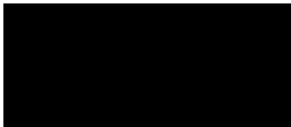
Complementary therapists also offer education to encourage people to take responsibility for their own health and not rely on Doctors at

the first sign of illness. Simple dietary and lifestyle measures can be so helpful where doctors don't have the resources to share this information in short 10 minute consultations. It is unreasonable to expect a doctor to get to the bottom of a person's health issues in such a short consultation.

I hope that this choice in our health care system remains. It would be such a shame for these services to be restricted. Health care has had so many advances, on top of centuries of traditional uses of natural remedies (we are only now being open to learning about our own Indigenous traditional remedies that have been neglected for years), it would be sad to see these advances ignored and kept from us. Thank you for listening to our valued opinions.

[REDACTED]

Sydney, Australia.



7<sup>th</sup> July 2019

To whom it may concern,

I am writing this letter in regard to The Medical Board of Australia's proposed decision to try and regulate the practice of, "Complimentary and Unconventional and Emerging Medicine"

My daughter was diagnosed with Lyme disease in 2016, and the process to arrive at the diagnosis was very time consuming and expensive.

Since that time, she has been under the care of an Integrated Medical Practitioner who has slowly seen her onto the path of a recovery. This recovery is something I have financed, due to her inability to do so. The rewards are coming to fruition, and the improvement in her physical and mental health has been amazing, and the cost has been well worth it.

I fear that if the proposed regulations are brought into effect, the cost will be insurmountable to the average person, which, in turn will see patients becoming sick again, and burdening the public health system with an array of symptoms and illnesses that are already being taken care of by Integrative Medical Practitioners.

I urge you to reconsider your proposed regulation changes, and maintain the status quo. I personally will have no choice but to sell my home, in order to maintain my daughter's ongoing progress, and people should not be held to ransom like this when it comes to our health!

My daughter has since gone on to have a baby, due to the amazing improvement in her health, and the close supervision of her doctor. For that I will be eternally grateful.

The availability of these amazing doctors is already too few; we can't afford to see a reduction of practitioners willing to practice Integrative Medicine.

The new regulations will create a discriminatory regime of double standards within a medical practice, where one group of medical practitioners must practice under a stricter set of guidelines than the rest of the medical practitioners.

I urge you to protect our rights, especially for the ones who can least afford it. We should have access to the medical treatment of our choice, including the professional and ethical use of Complimentary and Unconventional and Emerging Medicine.

Sincerely hoping for a favourable outcome.



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**From:** [REDACTED]  
**Sent:** Sunday, 7 April 2019 12:00 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To Whom It May Concern at The Medical Board of Australia...

Please, I implore you to resist from imposing greater regulation around the use of integrative, complementary and alternative medicines (CAMs), which will significantly restrain the practice of integrative medicine and the use of CAM modalities.

Personally, I was diagnosed with very early stage Menopause, at the age of 28 - due to ovaries not growing beyond pea-size.

For 12 years I endured the synthetic approach of HRT that was available to me. My body eventually had a severe reaction to the build-up of toxins delivered via the synthetic HRT. Once I discovered Bio-identical Hormone Replacement Therapy (BHRT), my health and life improved dramatically. Having used it for approximately 8 years, BHRT has had ZERO negative side-effects, and my vitality and quality of life has increased immensely.

If I were unable to continue the ease of access to (and use of) BHRT, it would impact my physical and mental well-being, quite substantially.

On review of the proposal currently being reviewed, ***please choose "Option One (1)"*** as the preferred option, as I would miss the innovation and compounding of natural therapies in my own health care plan.

If you have any queries, please feel free to send me an email or reach me on the number below.

Regards,

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, 8 May 2019 12:02 PM  
**To:** medboardconsultation  
**Subject:** Intergrative GP's and my rights

To whom it may concern,

I am emailing to express my great concern that you are looking to limit and control what Integrative Doctors can prescribe. By doing this, you are therefore looking to control and monitor their practice.

I see an integrative doctor regularly and have seen incredible improvement to my chronic illness- an improvement that I was not getting with my regular GP. I feel that this is an abhorrent limitation on my rights and the rights of my family to seek the appropriate medical attention that we need. To put these limitations in place is to not only deny my individual rights, but also deny thousands of other patients their rights to appropriate treatment and also to those professionals who have worked very hard to gain their accreditation's in their respected field.

thank you,

[REDACTED]

## Submission to MBA Consultation document on complementary and unconventional medicine and emerging treatments

27.4.19 My name is [REDACTED]. I am a retired computer programmer, with an Honours in pure mathematics, aged 67, email: [REDACTED]

I am making this submission because I am deeply concerned that my partner of 46 years, [REDACTED], will be unable to receive ongoing care for Alzheimer's Disease (AD) if the Medical Board prevents doctors from practising integrative medicine.

My partner is aged 80. She was diagnosed with AD by the geriatric specialist, [REDACTED], on 15.9.15. Her score on the Moca test was then 13/30. [REDACTED] held out no hope of any treatment for the condition. She prescribed Aricept, knowing that it is not an effective remedy, but that nothing better is recognised by conventional medicine. The diagnosis of AD was later confirmed by two neurologists.

This was a terrible blow for my partner, [REDACTED], and me. However, some time later, I came across the work of Dr Dale Bredesen, a leading researcher in AD. I have read some of his scientific papers, such as the one published in the June 2016, vol 8, no 6 of *Aging*, as well as the popular account by Mark Wheeler, published on the Net.

These papers convinced me that there was hope of arresting and perhaps even reversing the progress of AD in my partner. On 29.11.16 we saw an integrative doctor who had been trained by Dr Bredesen.

After undergoing a long series of tests, my partner was prescribed a multi-factor protocol for AD, consisting of dietary changes, exercise, removal of toxins, nutrient supplementation, hormone replacement therapy, fasting, stress reduction, good sleep, plus dealing with infections.

I am convinced that the doctor was at every step following the procedures laid down by Dr Bredesen and other researchers, ie acting according to the best scientific data currently available. He was responsive to our questions, always willing to explain the science behind every test or protocol, as well as being agile in adapting his approach according to [REDACTED] needs and preferences. He paid close attention to detailed test results in order to obtain the best possible outcome.

We followed the dietary restrictions and other protocols we were given.

On 23.1.18 [REDACTED] got 24 in Moca, whereas healthy is 26-30.

Essentially, nearly all her lab values are in the optimal range. Vitamin D is good, homocysteine is only 4 - which is very good, triglycerides are 0.8. She decreased her dose of the anti-depressant Dothep from 150 to 100.

Her overall health is excellent and she is not suffering any side effects from the many supplements and hormones she is taking. She feels positive, is fit and feels well. She looks about 20 years younger than her actual age.

The most important thing is that [REDACTED] is not getting worse. Forty-three months after her diagnosis of AD, she is functioning well, including going on trips to Europe, Asia and Africa. On the last trip she did a 13 km walk that included a moderate amount of climbing.

Integrative medicine has not exposed my partner to any risks, unlike Aricept, which ruined her digestion. In truth, I do not know how she would be without the AD protocol. However, the important point is that we are doing all we can, according to the latest science, and this gives us hope.

Please do not take this hope away!



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## **The science behind the protocol**

Conventional medicine accepts the amyloid-beta hypothesis, ie that to treat AD we need to prevent or remove the amyloid-beta plaques that form in the brains of patients with the disease. There are drugs that can do this, but they do not make patients get better, if anything they do the opposite.

AD arises from an intrinsic and healthy downsizing program for the brain's extensive synaptic network. In AD, an otherwise normal brain housekeeping process has gone haywire. The brain suffers some injury, infection or other assault and responds by defending itself. The defence mechanism includes producing amyloid-beta. That's why trying to get rid of amyloid-beta hasn't been helpful in treating AD.

AD is in fact a protective response to three different processes: inflammation, suboptimal levels of nutrients and other synapse-supporting molecules, and toxic exposures. Dr Bredesen's protocol can halt and often actually reverse the progress of AD. More than 200 patients have been successfully treated.

The protocol has not been clinically tested in large studies because it is seen as "too complicated". Medical studies are designed to test a single drug in isolation. Dr Bredesen was unable to have his protocol tested because it does not conform to the standard testing method of a single drug or procedure against a control group.

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**From:** [REDACTED]  
**Sent:** Saturday, 29 June 2019 8:27 PM  
**To:** medboardconsultation  
**Subject:** Integrative Doctors

To whom it may concern

I am writing in support of integrative medical practices. I am a patient of an integrative doctor whom is currently treating my on going chronic conditions, hypothyroidism, hashimotos and chronic pain.. Since seeing my current integrative doctor my condition has stabilized and managed.

Prior to this for many years under several different general practitioners and specialist my health was deteriorating, I have many many tests and different prescription medications which were only making me worse.

I finally made the decision to see an integrative doctor and thankfully I am having improvements, through a holistic approach, whole food diet, supplements. I am now doing so much better and only requiring 1 prescription medication for the hypothyroidism, which is now in perfect range and stabilized.

I would not be having these improvements and less pain daily if I had on continued down the road on GPS and specialist appointments to no avail.

Please do not make life harder for sick ppl, we already have a battle with our own health, we need to be able to keep all options open if we have any chance of regain health.

Kind regards  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 7 March 2019 12:22 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

Medical Board Submission

Regarding the public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments. As an Australian citizen I feel it is important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues. I have been suffering from Grave's disease, conventional medical doctors have not been able to successfully treat my condition and bring me to a satisfactory level of health.

Pharmaceuticals and the use of conventional methods did not work and wasted Medicare funds and resources. Seeing an integrative medical doctor for the last ten years, who included lifestyle change, diet and supplements of vitamins and minerals to address my problems that my condition improved. If I was lost the freedom to chose and was forced to a doctor restricted in what he or she is able to prescribe for me I fear my health would deteriorate and continue to impact on my family, career and wellbeing.

Concerned,

[REDACTED]

07/03/2019

# **Submission to MBA Consultation Document on Complementary and Unconventional Medicine and Emerging Treatments**

**Name:** [REDACTED] **Female** **Age 68**

**Retired – former health professional**

**Email:** [REDACTED]

## **My history**

In 2005 I suffered severe stress burnout after 6 years in a senior management position with a [REDACTED]. After leaving that job a year later and taking 6 months leave, I took on another senior position for 18 months with [REDACTED].

Initial treatment from my Sydney GP was cardiac focussed. When my BP kept dropping precipitously on a bicycle stress test I was referred for a Sestamibi stress test, which was clear. On request I was given anti-depressants for a short time and later I was put on low dose thyroxine which did little to help my fatigue.

With no benefit from my GP, I saw a naturopath who measured my cortisol levels and found them very high and erratic, explaining my longstanding insomnia and anxiety. Over time I tried various herbal and natural remedies, with short-term benefits, the exhaustion always returning.

Due to continuing ill health I left a career I'd intended to follow till 65, and moved to the country at the age of 57. I had assumed that with less stress and a healthier lifestyle I would get better but continued to suffer exhaustion and anxiety as well as multiple physical symptoms – muscle and joint pain, gut issues etc.

I became increasingly unwell, physically and mentally exhausted. I reached the point where I wondered how I could go on living if this condition continued to deteriorate. Sometimes it seemed my only option was suicide yet something in me refused to accept I had a chronic illness and was convinced that it was “fixable” if only I could find the right person to fix it. Fortunately I found them.

## **My experience with integrative medicine**

When I first went to see “Dr J” I truly wanted to die. He ordered a DNA screen (being a qualified geneticist) and a range of biochemistry – which he had also studied in depth. On my return appointment I asked him “Will this be another trip up the garden path or will it be life-changing?”. He looked me straight in the eye and said “This will be life-changing”. And it has been.

Dr J pointed out that all the other remedies I'd tried had limited success because they acted “downstream”, while he identified the actual source of my problems and worked from there. It transpired I had a range of SNPs – about 15 polymorphisms which contributed to increased susceptibility to stress, inflammation and other symptoms. I also had severe deficiencies and imbalances of vitamins, minerals etc which had impacted increasingly over time.

In September 2014, Dr J started me on a 3 year rebalancing program and talked about “joining the dots” between my various genetic issues. This meant changes needed to be implemented in a particular order, with careful monitoring to ensure the body was brought gently back to its natural state after close to 50 years of worsening “derangement”. Treatment involved high doses of vitamins, minerals, amino acids and neurotransmitters, provided by a compounding chemist.

Within 2 weeks of beginning the supplements, I started to feel better and could only say as time went on that “my inner landscape changed”. Apart from some initial nausea from B vitamins I have suffered no adverse effects over the course of my treatment. And I continue to feel better physically and mentally.

I also persuaded my [REDACTED] to see Dr J regarding the genetic issues which could affect her children and grandchildren and it turned out her biochemical imbalances were far worse than mine. Unfortunately soon after their first meeting, Dr J diagnosed her with pancreatic cancer – picked up very quickly because of those specific biochemical levels.

The next few years of my rebalancing program were set back by [REDACTED] long illness and death, then 2 years of ugly legal action from her partner. Without the support of my GP and the treatment I was receiving, I would never have survived the intense stress of that period.

However, once the stress was resolved, I regained health and Dr J was able to reduce my supplementation. My blood levels are now normal, I have lost a substantial amount of weight with minimal effort, my energy is good and while I watch friends with chronic illnesses become sicker, I can happily say that at 68 I feel better than I have probably since my 30s.

I am aware that due to the genetic origin of my deficiencies, I will need to take supplements for the rest of my life. On one occasion shortly after [REDACTED] death, I went on holidays without my pills due to a missing script, and within weeks my zinc level had dropped precipitously and the old exhaustion engulfed me. This made me realise that losing access to the GP who maintains my health and sanity would have devastating consequences.

### **Benefits of the care I receive**

Dr J respects my capacity to be an equal partner in my health care – he encourages me to be aware of subtle changes I'm experiencing, keeps me fully informed of results and answers any questions that arise from my own reading. He takes the time to involve me in my care.

In the beginning he set out a comprehensive plan for rebalancing, and approximately what it would cost, since very little is covered by Medicare. I am fortunate to be able to afford it and when I look back at the money I spent on “stress management” and remedies that didn't work, plus the loss of my well-paid career at an early age, it's a small cost and I will happily do without little luxuries to keep myself well.

My situation is common to many people I know: general unwellness, an odd collection of symptoms that don't fit into standard clinical guidelines, and often crushing fatigue. Most GPs have no answer for people like me. However, many friends have been helped by Dr J and the other integrative medicine GPs we are fortunate to have in the area.

I can only say that without Dr J's in-depth knowledge of genetics and biochemistry, and his understanding of integrative, truly individualised medicine, I would probably not be here. At the rate of physical and mental deterioration I was experiencing in 2014, and the total inability of any other GP to help me, I was very clear that in time my only option would be suicide. With no family to consider, such a decision would have been taken very rationally while I still had the capacity.

Instead, at 68 I have a life that is full, well and happy. And that's entirely due to Dr J identifying genetically based deficiencies in some of my body's own components, which over the long term caused the cascading dysfunction of multiple physiological processes. I do not take any drugs, apart from a small dose of levothyroxine, but for the rest of my life I will need to take a particular combination of vitamins, minerals and amino-acids – I stress, the body's own building blocks.

I fear that the evidence base that medical practice now demands will not be developed because of the very nature of truly individualised medicine. The diagnostic complexity of those who seek out integrative medicine GPs doesn't readily lend itself to controlled studies and there is no money to be made from a pharmaceutical or technological solution. However, the money to be saved in the health system by making people well is immeasurable.

With advances in genetics and the understanding of the body's complex biochemistry, integrative medicine must be the medicine of the future. Please, for me and many others whose lives would be seriously impacted if our GPs could no longer practise as they see fit, I ask the Medical Board to ensure that this very powerful and effective form of medicine is not just supported, but given the resources to develop within the frameworks that the profession requires.

Thank you

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**From:** [REDACTED]  
**Sent:** Thursday, 6 June 2019 9:46 AM  
**To:** medboardconsultation  
**Subject:** Medical Board Submission re; complimentary and unconventional medicines

I have only just become aware this medical board submission.

I feel very strongly that as an Australia citizen, holistic and complimentary medicines are a valuable part of our medical treatment in Australia. Conventional medicine does not always work. Most of the time the pharmaceuticals that are prescribed cause other problems and surgery can be avoided at times, such was my experience, by other treatments such as massage, laser therapy and yoga.

When my blood pressure presented higher than was normal a tablet was prescribed, but simple meditation did the trick. No side effects from pharmaceuticals either.

My health has benefited from an integrative doctor and I feel that with any restrictions placed on my treatment I would still be suffering and so would my work place and family.

[REDACTED]  
06/06/2019

Business Manager.

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**From:** [REDACTED]  
**Sent:** Friday, 12 April 2019 7:15 PM  
**To:** medboardconsultation  
**Subject:** Concerns for health reform from a patient

To whom this may concern,

I am writing to you with concern for my life.

In May 2015 I was diagnosed with the ASPS stage 4 or metastatic.

I was fortunate to have an oncologist that specialises in my cancer subtype, Sarcoma's.

I was then told that there were no treatment options for me other than a trial drug. This trial drug was actually found with genomic testing ironically, which was confirmed by an RGCC test I had done which is done by a conventional oncologist in Greece.

This test showed that the trial drug I was about to go on was going to be effective, the CASPS trial was effective for 18 months before I was kicked off the trial after losing 60+ kilos, developed a hole in my stomach and eventually my tumours were growing at over 25%.

After leaving the trial I was had no other options for me to go to and was referred to palliative care once again.

I choose to use the information I had from the RGCC test and try an 'INTERGRATIVE'

Approach and use IV nutrients. I spent 6 months doing this whilst always looking for any way to heal my terminal diagnosis.

I was eventually referred to an immunotherapy trial at [REDACTED] in [REDACTED] with [REDACTED]. Of course this was a trial and required baseline scans, which I hadn't had until my last scans of the previous trial. Upon receiving the results of the scan [REDACTED] was interested in what I had been doing as my tumours had gone from growing at 25%, To being stable or the same size as what I left the previous trial measurements.

Interestingly enough one of the combination immunotherapy drugs was actually tested on my RGCC test and it came up as ineffective. I am willing to try anything to heal and consistently research to try and be the first person to survive my cancer type.

After 6 months on the trial in [REDACTED] I had a new tumour grow in my brain to which I had to have radiation on.

After doing this I consulted with [REDACTED] and she wanted me to continue on this trial. I asked her why she wanted me to continue as I had grown a new tumour and the tumours were non responsive.

These were the words that broke my heart and why I want to evoke change in the medical system which is built around \$ in my opinion and my first hand experience.

"I JUST DON'T WANT YOU GOING BACK TO NATURAL MEDICINE"

I couldn't believe what I heard and still struggle when writing this material.

This is the mentality that needs to be broken in the medical world.

Why should it matter how healing is done if the desired result is being achieved?

So after I had to withdraw myself from the trial, [REDACTED] who helped me find this trial was going to set up a fundraising account as I'd already spent \$100,000's on trying to stay alive already. I was then told that they could not be associated with the treatments I was looking to do even though they were legal here in Australia.

Upon my return from the [REDACTED] trial and my intention to continue on with the treatments only to find that a doctor had made a complaint about my doctor who was providing me my life support and I had to search elsewhere for my IV nutrients.

I've seen first hand how broken this medical system is, unfortunately it doesn't come down to best practice but more on keeping the system 'financially sustainable'

So now I know what heals me and will allow me to help cure others of cancer but I can't because it's not supported by the government and its system, plus my ability to fund these treatments

The bullying that goes on to not only the doctors but the patients is ridiculous, which is why I keep all my records! I can personally bring down quite a few doctors even like [REDACTED] but it's the system that needs to change.

I am a problem for this system because I was supposed to be dead nearly 4 years ago, but now I have to try and keep healing myself while unexpectedly finding gaping holes in how we heal. I've been discriminated against by [REDACTED] both myself and my wife because I'm terminally ill and look so healthy.... the medical model that we operate in only looks at certain aspects of science and is intentionally interfering with future healing pathways all in the scope of \$.

I hope everyone on the medical board is well studied in the medicines you are trying to take down. Because as far as I've seen the science is unrefutable and at some stage someone will be held accountable for intentionally misleading the public. Especially with the history of cancer treatments and the lack of success we've had over the past 40 years.

Be mindful of your decisions and who they might effect because change is coming whether you like it or not, we are a population who is only getting unhealthier and with the lack of knowledge our qualified doctors have on nutrition and the fundamentals of how our metabolism plays such a huge role in our health will expose itself. Only to lose greater faith in the system that will be seen to have hidden this for too long.

Kind Regards,

A solid black rectangular box used to redact a signature.



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**From:** [REDACTED]  
**Sent:** Monday, 1 July 2019 5:23 PM  
**To:** medboardconsultation; medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

I apologise for not sending this yesterday when submissions closed but I had an operation on Friday for a replacement hip & did not leave hospital until late this afternoon. I did get my son [REDACTED] to tell you I wanted to submit so I hope it is alright. The article was only in the local paper on Saturday so no time to do anything.

I take a lot of supplements as I have many medical conditions which I enclose a list of. If I took drugs for all of them I would be drugged to the hilt which is not good. Too many dangerous side effects & chemicals in them. So I prefer to use natural therapies & have done for over 40 years. I do believe in the natural process as that is what the body consists of. It has always served me well.

Most importantly I would also like to try medicinal cannabis to be available at a reasonable cost so I can get relief with a natural plant that is a known healer. What concerns me is the driving law that can take your licence off you if it is found in the system. It would mean I could not up the dosage too high for fear of being caught by Police when technically it should not affect one if used for pain relief. This needs to be urgently amended. It is after all a natural plant having been used for centuries to heal.

It concerns me if I decide to use under the SAS which I have been approved for that Police can take my licence off me if they decide to. I have a letter from the prescribing Doctor & would like to know that it would be accepted. I am 77 years old and never had an accident & need my licence to do the things I enjoy & that keep me occupied. I do 8 hours voluntary work a week plus go to an art group once a week. I also need my car to get to appointments around the area, public transport is not an option. There is no way I would drive if I felt impaired & would tailor my dose to account for that. I would like to remain as active as possible for as long as I can. Taking natural therapies means I can take care of myself. Being able to take medicinal cannabis will mean I can start cutting out some horrible addictive drugs & treat myself the natural way.

Thank you

[REDACTED]  
Artist  
[REDACTED] .

"Art is not what you see, but what you make others see" Edgar Degas artist

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**From:** [REDACTED]  
**Sent:** Wednesday, 10 April 2019 8:48 PM  
**To:** medboardconsultation  
**Subject:** In support of complementary medicine

To the Executive Medical Officer

I am writing in regards to the the medical boards decision to set strict regulations governing the practice of Complementary and Unconventional and Emerging Medicine. We have been involved with an excellent Doctor who practices Complementary medicine and we support the continuation of the current existing guidelines for medical practice.

A particular incident recently involved my 14 year old son's health. He had missed a lot of school in term 4 of 2018 due to being generally unwell with lethargy, stomach pains, no temperature, headaches, muscle cramps and dizziness. I took him to our local GP who we had seen many times before with no issues. On this incidence, I took my son to see the GP on three separate occasions over a 2 months period as he wasn't improving. The GP just kept saying that my son had a virus and on each separate visit he said he had just contracted another virus on top of another virus, "just bad luck". He did do a blood test on one occasion to rule out glandular fever and this was negative. I work as a Registered Nurse at [REDACTED] and I was feeling very frustrated by the Doctors attitude and lack of care.

My parents have been seeing a wonderful Doctor in [REDACTED], NSW who practices complementary medicine for many years now. We were able to get an appointment to see this Doctor and we are very thankful that we did. He did a thorough examination of my son, ordered more blood test and stool tests. The faeces results showed that my son had parasites Dientamoeba fragilis and Blastocystis species and his blood tests showed that his Hb (although within normal limits) had dropped significantly, liver function tests were elevated and his zinc levels were low. Basically my son was a very sick little boy. If it wasn't for this particular Doctor, thinking outside of the box, my son would have continued to be sick, as we searched for answers and he would've missed more school. His treatment for the parasites was 8 weeks of antibiotics (Bactrim & Paramomycin) with Nilstat and Probiotics to protect his stomach flora and vitamin supplements. The Doctor did not hesitate to put my son on antibiotics but he also complimented them with vitamin supplements and Probiotics. My sons latest blood tests showed that his iron, zinc and liver function tests are improving and his stool tests was negative. We will follow up with this Doctor in 6 weeks time.

I feel that the medical board should recognise that Integrative medicine, utilising complementary or Unconventional medicine as well as conventional medicine, as a Speciality. We actually need more of these specialist Doctors!! A patient, in consultation with their Doctor, should be given free choice and options in making decisions about their medical treatment. No changes should be made to regulations governing the practice of Complementary and Unconventional and Emerging medicine

Your sincerely

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Tuesday, 30 April 2019 10:56 AM  
**To:** medboardconsultation  
**Subject:** complementary and unconventional medicine and emerging treatments

I write to support the complimentary medicine practitioners (physicians and others) who supported my recovery from cancer (33yrs ago), and have continued to support my immune system in an ongoing way from the effects of the radiation treatment which caused damage to my lung; the medical treatment that was "my guarantee" of cancer not re-appearing - it did and I had a breast removed as a result. The damage to my left lung has resulted in years of shortness of breath, lack of energy, lack of stamina, tiredness, and the inability to be physically active. That I am still alive I credit entirely to the knowledge and expertise of my complementary physician, who has steadfastly cared for my damaged immune system with health giving vitamins, minerals and intravenous infusions of Vitamin C.

In my family are four damaged young people (not all blood related), Cerebral Palsy, Down Syndrome, ADHD, and Autism; such is the status of health in the younger generation today. WHY! - does anyone ever ask the question WHY! so many of our children are developing diseases that were not prevalent in my youth. At 83yrs of age I can look back on the generations and review their health patterns; as a nurse throughout my adult working life I watched with disbelief the number of children born healthy who have succumbed to sickness, and asked myself the question WHY! The ADHD and Autistic members of my extended family have been treated in a complementary way and have travelled well, overcoming their original diagnosis to become mature members of the community. ***Isn't this of interest to the general medical fraternity?***

Supporting autism for the last 18 years I have shared the knowledge gained from complementary practitioners with thousands of parents who have willingly tried dietary changes, and have implemented the natural healthy protocols suggested by their individual physicians/practitioners, resulting in countless children overcoming spectrum disabilities to reach maturity with bodies and minds free of toxins, and the ability to function in a neurotypical world. WHERE? do we get such advise from the general medical profession, who decry our methods and ridicule as at every turn?

There is much to learn from complementary medicine, and emerging treatments. I don't refer to them as unconventional because basically they are common sense treatments, and I know of many members of the Australian Medical Community who turn to them personally when in need for themselves or their families.

Regards [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 11 April 2019 10:03 AM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine. Submission by [REDACTED]  
[REDACTED] (Chronically ill for the last 24 years).

1. Do you agree with the proposed term 'complementary and unconventional medicine and emerging treatments'?

If not, what term should be used and how should it be defined?

The term "unconventional" should be dropped, as it has negative connotations. All medicine should simply be called "medicine".

2. Do you agree with the proposed definition of complementary and unconventional medicine and emerging treatments – 'any assessment, diagnostic technique or procedure, diagnosis, practice, medicine, therapy or treatment that is not usually considered to be part of conventional medicine, whether used in addition to, or instead of, conventional medicine. This includes unconventional use of approved medical devices and therapies.' If not, how should it be defined?

I think the term "conventional" medicine should be replaced with the standard term "medicine".

Many illnesses can not be helped by "conventional" medicine, whereas they can be helped by "integrative" medicine, or in some cases, "off label" usage of a "conventional" medicine. If "conventional" medicine has no way of helping someone with a particular illness, it is not benefiting the patient to do *nothing*. If there is scientific evidence to explain the use of a treatment - (eg blood tests, urine tests, scientific paper showing the benefits), the practitioner should not be hindered or prevented to do so. As long as there is a scientific reason for the use of a medicine or treatment, it doesn't matter what label you give it - It is all medicine.

3. Do you agree with the nature and extent of the issues identified in relation to medical practitioners who provide 'complementary and unconventional medicine and emerging treatments'?

If medical practitioners provide "complementary and unconventional medicine, including emerging treatments", it is because they consider these treatments to do a better job of treating the patient than "conventional" medicine and treatment. Often, integrative medicine is far more thorough than "conventional" medicine - particularly with chronic illnesses that can't be diagnosed and treated within a 5 to 10 minute G.P. consultation. As long as the practitioner has a scientific reason for providing a particular treatment, they should be able to do so without hindrance from the Medical Board or T.G.A. Generally speaking, integrative G.P.'s are more thorough and better educated than so called "conventional" G.P.s.

4. Are there other concerns with the practice of 'complementary and unconventional medicine and emerging treatments' by medical practitioners that the Board has not identified?

The main concern for the use of ANY medicine (WHICH INCLUDES SO CALLED "CONVENTIONAL MEDICINE") is when it is prescribed to a patient without a scientific reason for doing so.

5. Are safeguards needed for patients who seek 'complementary and unconventional medicine and emerging treatments'?

Safeguards are needed for patients who seek ANY type of medicine. A safeguard should be that the practitioner can provide a scientific reason why a particular treatment is being prescribed.

6. Is there other evidence and data available that could help inform the Board's proposals?

"Conventional" medicine does not have all of the answers for disease - particularly chronic disease.

Large funding budgets for clinical trials are usually only affordable by large pharmaceutical companies who have the patented rights to a medicine. This leaves many successful treatment options without the ability to conduct large clinical trials. From my experience as a sufferer of M.E./C.F.S. treatments such as Low dose Naltrexone, D.H.E.A., Medicinal cannabis, Amino acid supplementation, Vitamin & mineral supplementation, and herbal therapy for immunity can all be beneficial - even life changing for the patient.

It is immoral of the Medical Board, to make these treatment options unavailable to a doctor / patient, or hinder the doctor to provide them.

7. Is the current regulation (i.e. the Board's Good medical practice) of medical practitioners who provide complementary and unconventional medicine and emerging treatments (option one) adequate to address the issues identified and protect patients?

YES. Option one is adequate. If you create extra hurdles and barriers to practitioners it will make practitioners less likely to want to help patients - particularly those with chronic diseases. Many patients with chronic diseases are having better quality of life by using "unconventional" therapies & treatments. If you take away the practitioners ability to provide patients - or hinder their ability to provide patients, you will be responsible for CAUSING HARM to patients. People that may not be "cured" but have *some* quality of life will become sicker - even bed bound. Many will kill themselves. Do you want to be responsible for that? Is funding by pharmaceutical companies more important than that?

8. Would guidelines for medical practitioners, issued by the Medical Board (option two) address the issues identified in this area of medicine? Practice means any role, whether remunerated or not, in which the individual uses their skills and knowledge as a health practitioner in their profession. For the purposes of these guidelines, practice is not restricted to the provision of direct clinical care. It also includes using professional knowledge in a direct non-clinical relationship with clients, working in management, administration, education, research, advisory, regulatory or policy development roles, and any other roles that impact on safe, effective delivery of services in the profession.

Option 2 would make it more difficult for patients to access suitable health care - particularly chronic conditions for which "conventional" medicine has NO ANSWERS. It is one thing for doctors to "DO NO HARM"; but it CAUSES HARM by obstructing doctors

from providing scientifically based treatment. It would also be soul destroying for doctors who want to help their patients but can't because of restrictions placed upon them by the Medical Board.

"Conventional" medicine does not have all the answers - particularly for chronic disease, and it is arrogant to pretend that it does.

"Stakeholders" are obviously big pharmaceutical companies who want to increase their profits at the expense of complementary medicine professionals - and more importantly, patients lives.

Option 2 (which is obviously being promoted by the big pharmaceutical companies) seems to rely solely on full clinical trials being used as a basis for practitioner treatment. Who funds the trials for herbal or other "alternative" medicine? This Option favors big pharmaceutical companies with big budgets.

As long as there is a scientific basis for a practitioner using a "complementary" or "unconventional" medicine, then it should be a treatment option available without barriers and extra regulatory procedures.

9. The Board seeks feedback on the draft guidelines (option two) – are there elements of the draft guidelines that should be amended? Is there additional guidance that should be included?

Option 2 should be dropped entirely. Why are you even calling for "consultation" if you have already decided to go with Option 2? It just shows your bias, and that you have already made up your minds *before* considering these submissions that people are putting forward.

10. Are there other options for addressing the concerns that the Board has not identified?

The Board needs to be objective with the information being put forward for Option 1, instead of making up your minds to adopt Option 2, and *then* calling for public "consultation" later.

11. Which option do you think best addresses the issues identified in relation to medical practitioners who provide complementary and unconventional medicine and emerging treatments? • Option one – Retain the status quo of providing general guidance about the Board's expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board's approved code of conduct. • Option 2 - Strengthen current guidance for medical practitioners who provide complementary and unconventional medicine and emerging treatments through practice-specific guidelines that clearly articulate the Board's expectations of all medical practitioners and supplement the Board's Good medical practice: A code of conduct for doctors in Australia.

Option 1 should be retained. Doctors who currently use complementary medicine & treatment should not be regulated or hindered by The Board any more than they currently are. Even now, it is difficult for doctors to prescribe alternative treatments such as medicinal cannabis for chronic pain. Current guidelines and regulations influence doctors to use pharmaceutical drugs (many of which are addictive and harmful to health long term) for chronic diseases, even when there are more suitable, non addictive natural treatments available. If a G.P has obtained extra qualifications in Naturopathy, or herbal medicine for example, he should be able to decide which course of treatment is the most beneficial to the patient - not have to prescribe

pharmaceutical drugs because there is no other option he is allowed to do. This is not in the patients best interest and may cause unnecessary harm.



Medical Board of Australia  
GPO Box 9958  
Melbourne, Vic. 3001



## COMPLEMENTARY AND UNCONVENTIONAL MEDICINE AND EMERGING TREATMENTS

I am I 79 year old women and the very thought of being limited in my choice of how I care for myself is very disturbing. The rare occasions I have needed a Doctor up until 2003 I have been very happy with their advice and have treated minor afflictions with whatever suits me at the time sometimes with the help of a Doctor who also believed in complementary medicines. I DO NOT WANT THESE RIGHTS TAKEN FROM ME by anyone.

I have been seriously ill since 2003 trying different doctors and being referred to various Specialists. No one could give me any answers or relief to my symptoms until I heard a Doctor speaking at [REDACTED] University in [REDACTED] Dr [REDACTED] closed a part of his talk with the words "unless you have Lyme disease". I looked further into the symptoms and recognised them all as what I was experiencing. I had my first appointment with Dr [REDACTED] in December 2013 at which further tests were arranged.

When the results arrived back in March 2014 I started on antibiotics and supporting supplements. There were, of course, side effects which I was prepared for and symptoms I had had previously changed but I started to feel generally better, think clearer and express my thoughts and feelings. By April 2015 I was able to get about enough to have a holiday.

It has been and is still a long way back after being almost housebound for so many years and I still have bad days, but without the support and dedication of Dr [REDACTED] I would probably be needing full time care.

In 2003 I was bitten by a tick on a property I had recently bought. I developed a high fever with nausea and vomiting, aching throughout the body and head ache. This lasted for over two(2) weeks and I put it down to a bad dose of flu. Then came all the rest of the symptoms:-

Fatigue	Vision Problems
Photophobia	Hair Loss
Difficulty Eating	Neck & Facial "cramps"
Irritable Bowel	Insomnia
Poor Balance	Dizziness
Anxiety	Trouble Speaking
Disorientation	Painful Joints and Bones.

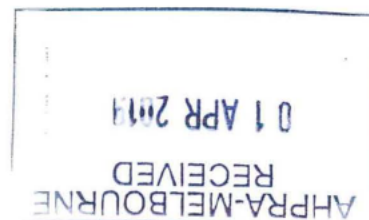
For the next 10 years numerous test were done including ECG, Xrays, CT scans and MRIs and a biopsy for temporal arteritis – all clear.

I have been referred to several specialists:-

Rheumatologist (suggested aspirin)	Psychiatrist (suggested Warfarin)
Psychologist	ENT Specialist
Neurologist	
Ophthalmologist	

Submitted by [REDACTED] 29/03/2019

Mob: [REDACTED]



## Public consultation on complementary and unconventional medicine and emerging treatments

I am a patient with long and generally positive experience of complementary and unconventional treatments, some of which are newly emerging. I have been disabled by several chronic diseases for the last two decades. Thanks to the expertise of doctors who go beyond conventional medical practice, the extent of those disabilities has been markedly reduced. I am able to live independently, with more function, and with much less suffering than before. I wish to go on receiving the treatments that make my life bearable, though I know the Medical Board disapproves. I oppose any move that would make my doctor unable to provide such continued treatment.

I wish to address several of the Board's discussion questions.

*2. Do you agree with the proposed definition of complementary and unconventional medicine and emerging treatments – 'any assessment, diagnostic technique or procedure, diagnosis, practice,4 medicine, therapy or treatment that is not usually considered to be part of conventional medicine, whether used in addition to, or instead of, conventional medicine. This includes unconventional use of approved medical devices and therapies.' If not, how should it be defined?*

I think the definition, and perhaps the term itself, is problematic. It relies on the term "conventional medicine", which is not defined, nor is there an indication of whose definition should be used. The term "emerging treatments" is especially problematic as it encompasses any treatment which is "new"... also not defined.

*3. Do you agree with the nature and extent of the issues identified in relation to medical practitioners who provide 'complementary and unconventional medicine and emerging treatments'?*

I don't. My experience has been that integrative or functional medicine practitioners in the very large majority DO follow the draft guidelines in almost every respect, except for unconventional prescribing. This includes areas of concern such as the prescribing of hormones outside conventional guidelines, off-label prescribing, functional medicine pathology, and treatment of conditions not yet fully recognised by conventional medicine.

*9. The Board seeks feedback on the draft guidelines (option two) – are there elements of the draft guidelines that should be amended? Is there additional guidance that should be included?*

While I prefer option 1, I have some comments on the draft guidelines.

3.2 Commercial or financial conflict of interest: I think it's a good idea that doctors don't sell products they recommend, except at cost. However, I think every doctor who gets paid by the consult has a financial conflict of interest.

4.2 Providing patients with information: This is a great idea in theory, however it's not quite as useful as it sounds. Firstly, integrative medicine is already beyond the price range of a lot of people. This is in part because the practitioners spend so much of their week reading and studying. Adding a burden of providing a sheaf of information on every vitamin they recommend would greatly increase the cost of practice, which would be borne by patients. Too many patients already treat themselves because they can't afford an integrative doctor. This requirement could exacerbate that problem.

Secondly, information on the efficacy and risks of an unconventional treatment are not that useful without similar quality of information on other options. If all doctors are not required to provide this level of information about the conventional options, a patient won't have anything to compare the less conventional treatment to.

5.5      Diagnosis informed by best currently available information: Needs a safeguard to ensure "best" isn't interpreted merely as conventionally accepted.

6.3      Ensure provision of treatment complies with TGA requirements: Doctors should not be restricted from recommending treatments that need to be ordered from overseas. "TGA requirements" were tl;dr, I'm afraid, but doctors need to be free to use medications and supplements in accordance with their best judgement and good evidence, including using pharmaceuticals in unconventional ways. Some of my own greatest health improvements have come from such interventions, including hormones and antibiotics prescribed outside of conventional guidelines.

*11. Which option do you think best addresses the issues identified in relation to medical practitioners who provide complementary and unconventional medicine and emerging treatments?*

*• Option one – Retain the status quo of providing general guidance about the Board's expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board's approved code of conduct.*

*• Option 2 - Strengthen current guidance for medical practitioners who provide complementary and unconventional medicine and emerging treatments through practice-specific guidelines that clearly articulate the Board's expectations of all medical practitioners and supplement the Board's Good medical practice: A code of conduct for doctors in Australia.*

*• Other – please specify.*

I believe Option 1 is best. Existing guidelines are adequate. While writing further guidelines may not sound like it would restrict patient choice in healthcare, it could too easily be used to do exactly that. While most of the draft guidelines seem quite sensible, (and are indeed followed by most practitioners they would apply to) it's too easy to use them to stifle innovation, to restrict options, and to raise the risks and costs of cutting-edge practice.

Sincerely,

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 20 June 2019 11:02 AM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

Dear Sir or Madam

My name is [REDACTED]. I spent my entire childhood being subjected to alternative medical treatment, in the place of real, actual medical treatment, because of my very gullible mother. I am emailing you to request that you tighten the regulations concerning the provision of alternative treatments. These treatments are often unproven, are potentially dangerous, and delay actual medical treatment. As a result, I have lifelong complications. These people preyed on my mother's ignorance and fear, and I will suffer my entire life because of it.

Providers of these treatments shun regulation and the critical testing of the treatments, because they know there is no scientific basis upon which they can work -- things like acupuncture and homeopathy are examples of treatments that have failed testing and are still promoted. The continued use of these ineffective treatments is simply revenue raising for practitioners and does nothing beyond a placebo. Please tighten the regulations so that vulnerable, desperate people are not exploited by these dishonest practices. We, the community, are counting on your leadership to protect the vulnerable from these predatory practices.

Thank you for taking the time to consider my email. Yours sincerely

[REDACTED]

**From:** [REDACTED]  
**To:** [medboardconsultation](mailto:medboardconsultation)  
**Subject:** Planned restrictions on integrative medicine  
**Date:** Friday, 29 March 2019 10:21 03 AM

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To whom it may concern,

My name is [REDACTED] and I am an Executive Assistant. As an Australian citizen I should have the right to choose what methods I use to address my chronic health issues and what works. I have previously suffered from what was thought to be severe depression and anxiety. I spent 2.5 years unable to work because of my condition. I was very ill for a number of years before that which severely effected my well bring and life. If I had not seen the integrative medicine doctor that I saw, I do not know where or how I would be today. I was diagnosed with mould illness or biotoxin illness as my house was water damaged. There is a government inquiry in relation to biotoxin illness.

[https://www.aph.gov.au/Parliamentary\\_Business/Committees/House/Health\\_Aged\\_Care\\_and\\_Sport/BiotoxinIllnesses](https://www.aph.gov.au/Parliamentary_Business/Committees/House/Health_Aged_Care_and_Sport/BiotoxinIllnesses)

Once my house was repaired and re-mediated and I followed a specific protocol to remove the toxins and mould from my body, (which was a number of different medicines that are compounded) and reduce inflammation, I was able to get better and now I am back at work full time leading a normal life. some of those medicines I will need to use on an ongoing basis to manage my condition.

Conventional medical doctors had not been able to successfully treat my condition and bring me to a satisfactory outcome. I would have still be treated and dealt with as to having a mental illness on antidepressants, I would still be off work, too ill to function. Using a G.P. prescribing pharmaceuticals and the use of conventional methods simply did not work for me in my situation. The only resolution they came to was to diagnose me with chronic fatigue syndrome and having a mental illness because they do not have the knowledge and training that integrative medicine doctors have, taking into consideration ones environment, exposures and toxic load and vitamin deficiencies. Until I saw an integrative medical doctor who included lifestyle change, the environment, toxins, genetics, compounded medications, diet and supplements to address my problems, my condition would have remained unchanged for many many years. If I cannot see an integrative doctor, I feel that my health would deteriorate and I wouldn't be able to manage my condition. It would have a continuing impact on my family, my work, and my well being If I did not have access to the current compounded medicines .

It would bring many people who are chronically ill to suicide not being able to access the compounded medications and supplements that are prescribed by integrative doctors. They are their last hope and have had many successful outcomes doing what they do. Normal western medicine does not have all the answers. These practitioners are filling the gap. Don't take that away from us.

Thank you for listening.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 20 June 2019 1:30 PM  
**To:** medboardconsultation  
**Subject:** Re: antibiotic therapy response

To the honorable Medical board,

I write to you as a patient who currently uses low dose antibiotic therapy to manage fibromyalgia.

The current proposal to limit doctors in giving antibiotic prescriptions will greatly impact my quality of life and mobility. After becoming afflicted with this debilitating condition, I searched for help with mainstream medicine treatments for 18 months. To my and many wonderful doctors dismay - nothing helped the pain and mobility and I spent many months unable to move without searing agony and pain, unable to participate in my once flourishing life. I stumbled across the low dose antibiotic therapy online and have not looked back since.

When I began low dose antibiotic therapy my whole quality of life improved beyond all expectations. I am now able to lead a relatively normal life with my husband and 3 children because of the impact these small amounts of antibiotics have upon my system.

Please consider not changing the current status of this.

I respect your concerns about the overprescribing and use of antibiotics, but this decision will directly affect my health and quality of life with my family.

This decision will potentially impact thousands of others who greatly benefit from this kind of treatment. There is very little out there for those of us with this condition that actually helps - please do not take away my right and ability to be treated and have quality of life through this program.

I am very thankful for your time, discernment and consideration of this matter.

Thankyou kindly

[REDACTED]

Oh that's interesting. Thankyou, I will look into it.

God bless.

[Show quoted text](#)

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**From:** [REDACTED]  
**Sent:** Thursday, 4 April 2019 9:40 AM  
**To:** medboardconsultation  
**Subject:** FREE CHOICE!!!!

***Regarding the public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments***

As an Australian citizen I feel it's important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

I have been suffering from EXTREME menopausal symptoms to the point where I could not sleep, drive, work,..... and had car accidents as a result that I had never had before.

Conventional medical doctors have not been able to successfully treat my condition, and bring me to a satisfactory level of health where I could function as a normal person.

Pharmaceuticals and the use of conventional methods simply did not work (and in some instances also delivered unwanted side-effects in my case, I felt WORSE taking it) and, seemed to waste Medicare funds and resources. It left me frustrated, sick because of lack of sleep, and grumpy. My family suffered from this.

**It was only when I saw an integrative medical doctor who included lifestyle change, diet and supplements of vitamins and minerals to address my problems that my condition began to improve. IT GAVE ME MY LIFE BACK!!!!**

If I cannot see an integrative doctor, or the Doctor is restricted in what he or she is able to prescribe for me, I feel that my health will deteriorate and have a continuing impact on my family, my work, and my wellbeing.

Results of NOT being treated by my integrative Doctor WOULD COST MEDICARE AND THE COMMUNITY WAY MORE OVER LONG TERM.

I FEEL THAT THIS SHOULD BE A PERSONAL, INFORMED CHOICE BY THE PATIENT!!!!

Very concerned,

[REDACTED] (55)  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Saturday, 8 June 2019 12:30 PM  
**To:** medboardconsultation  
**Subject:** Concerns of change

To Whom It May Concern,

I would like to understand why alternative compounding prescription doctors are being targeted?

Why is it you are not spending money on research that this becomes more main stream rather than supporting pharmaceutical companies. Your current approach will drive people to reach for overseas importers to get the medication that us produced in safe environments with trained professionals.

Australians will travel overseas to have tests and treatments we now have in safe environments.

I personally was a young women in my thirties when I was tired ,hair falling out and the doctor at my normal clinic had no idea why, it was a work colleague that had heard of this previously and suggested I see an intergrated GP that used compounding and extra lab tests to make people well.

This has worked and am very greatful that I feel better and my hair stopped falling out.

We need to progress forward not get stuck in red tape, people's options or attitudes.

Please take my email with respect that I with any other Australians want to be well and cab make good safe choices, within our current medical system.

Kind regards  
[REDACTED]



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**From:** [REDACTED]  
**Sent:** Thursday, 9 May 2019 12:07 PM  
**To:** medboardconsultation  
**Subject:** Submission re proposals to limit integrative medicine

Currently I am seeing a GP who practises integrative medicine. I suffer from Hashimoto's Hyperthyroidism and the doctor I am seeing closely monitors my thyroid levels and is able to prescribe both conventional pharmacology drugs and compounding pharmaceutical products to support me. As well as these drugs, I support my system with suggested vitamin and mineral supplements.

The treatment I have received has been exemplary and my general health has improved significantly. Prior to seeing this GP my overall health was not robust. I struggled to maintain full time employment in as stressful and demanding job. Since the reason for my generally low levels of energy were explained to me by my GP, I was able to approach my treatment with optimism. I implore the Board to consider the importance of an integrated, holistic approach to health care rather than relying solely on the information provided by pharmaceutical companies.

Yours sincerely

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Friday, 15 March 2019 12:55 PM  
**To:** medboardconsultation  
**Subject:** Public consultation on complimentary and unconventional medicine and emerging treatments

I would like to voice my opposition to the cancelling of unconventional medicine.

I am a 64 year old woman who gets 'compound' trochees for the treatment of adjusting women's natural hormones during and after menopause. I have found this treatment to be the best for my personal needs mainly because they are made to the specific needs of MY body.

I would be VERY disappointed to find that I couldn't get these anymore if this legislation goes through.

PLEASE UNDERSTAND ALL HUMANS ARE DIFFERENT AND MAY REQUIRE DIFFERENT TREATMENTS - We don't all fit into the same box!!!!

Regards

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Monday, 25 March 2019 4:55 AM  
**To:** medboardconsultation  
**Subject:** lyme disease

I have been diagnosed 30yrs ago as having ME with later was proven to be Lyme disease and because of the lack of proper testing and treatment because of Big pharma/drug companies I have had to seek alternative help. It is about time this whole affair was looked into-USA admit Lyme is adulterated mosquitoes in a lab and they also admit it is a germ warfare agent. Please stop harassing the people that can help us,  
yours sincerely [REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, 10 April 2019 8:52 PM  
**To:** medboardconsultation  
**Subject:** In support of Complementary medicine

To the Medical Executive Officer

I am writing in regards to the medical boards decision to set strict regulations governing the practice of Complementary and Unconventional and Emerging medicine. My wife and I have been a patient with an excellent Doctor, who practices complementary medicine, for the past 15 years and support the continuation of the current existing guidelines for medical practise.

Before this period, we had been attending the practice of our local General practitioner and at a point of general health we were not shown any signs of any mark of improvement. Our daughter is a Registered Nurse and recommended that we make an appointment to see the Doctor at [REDACTED] who specialises in Complementary medicine. Since that time of our first appointment, we have both experienced a marked improvement in our general health and well being. So much so we would not consider, unless it was a state of emergency, seeing a General Practitioner.

We both feel very fortunate that our daughter recommended seeing this Doctor. Despite our respected ages of 86 and 83 years we are now enjoying a full and active life. My wife plays golf at least once/week and I play lawn bowls at least 3 x per week. Our doctor prescribes us conventional medicine together with vitamin and mineral supplements.

I have had two Heart Valve Replacements during the last 10 years and have been operated on by a Cardiologist with recommendations by our Doctor. Our Doctor overseas my cardiac issues in conjunction with the Cardiologist. We always feel well informed after our appointments and have full trust in his medical capabilities. My wife and I have had various health issues over the years and our Doctor does not hesitate to order further medical test or refer us to other Specialist Medical Officers.

I feel that the medical board should recognise that Integrative medicine, utilising Complementary or Unconventional medicine as well as conventional medicine, as a Speciality. A patient should be given free choice and options in making decisions about their medical treatment and no changes should be made to regulations governing the practice of complementary and Unconventional and Emerging medicine.

Yours sincerely  
[REDACTED]

**From:** [REDACTED]  
**To:** [medboardconsultation](#)  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments  
**Date:** Tuesday, 4 June 2019 9:32:43 PM  
**Attachments:** [Submission to MBA 2019.pdf](#)

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Dear Sir/Madam,

Please find attached my submission on the complementary and unconventional medicine and emerging treatments.

Yours faithfully

[REDACTED]

Thank you for the opportunity to make a submission on the proposed draft guidelines for medical practitioners who provide complementary and unconventional medicine and emerging treatments.

While I agree that there should be standards of behaviour and professionalism for all medical practitioners, I do not think that the proposed guidelines are a step in the right direction. In particular, I have the following questions, concerns and comments.

The discussion paper mentions that the guidelines are a result of "feedback from stakeholders"; however nowhere in the paper does it list who the stakeholders are. Are they pharmaceutical companies, doctors who don't prescribe complementary medicine, patients, families of patients, oncologists...? I think it is important to know where the feedback is coming from, if only to be sure that there are no vested interests at play.

There are numerous paragraphs in the draft guideline describing complementary medicine and proposing a definition of it; however, nowhere in the document is there a similar definition for conventional medicine. If the proposed guidelines are for unconventional medicine, it is important to know what conventional medicine consists of so that it is clear how the two differ.

In reading through the document, most of the issues identified (e.g. cost, unproven efficacy, conflict of interest, over-prescribing, playing on patient fears) are just as applicable to conventional treatment and medical practitioners. It is unfair to have a guideline solely for those who are practising integrative or alternative medicine as this would seem to imply that only those practitioners suffer from these foibles. If there is to be a guideline, make it for all doctors and all forms of treatment.

In the "Issues and concerns about this area of practice" section (p6) of the discussion paper, the statement is made that "patients are being offered treatments for which the safety and efficacy are not known". As I mentioned above, this is not unique to alternative therapies. Many of the currently prescribed drugs and treatments are not renowned for safety and efficacy. They all have contraindications and potential adverse effects. For example, I lost my father to cancer. He was diagnosed with the disease early and went through the entire regimen of drugs and treatment but was dead in less than a year. Yet this was the "safe" and "efficacious" treatment. Lest you think this is an isolated case, I also knew at least 6 other people who had cancer and went through the prescribed treatments. They are all dead. Most died within a year and they died, not from the cancer, but from organ failure arising from the drugs that were used to treat them. This is not what I would call safe or efficacious.

There have been numerous publications which have highlighted a number of deficiencies in so-called drug studies. In some, the results which were not favourable to the study are simply ignored and only those showing a benefit following treatment with the new drug were included in the study. In others, selective use of percentages instead of absolute numbers made the drug appear to be more effective than it actually was while downplaying the side effects.

In the "Areas of practice" section (p8) of the discussion paper, the statement is made that "risks to patients are increased when practitioners offer 'alternative' treatments...in place of conventional therapies." That is an unacceptable generalisation and no evidence is offered to support that statement. The 'alternative' treatments are usually lower risk than the conventional treatment. Why do I say that? There are many examples in recent years but one which was of particular note was this. Some years ago there was a lot of publicity about the swine flu epidemic. While it was nowhere near as bad as we were led to believe it would be, one man in NZ did contract the flu and was admitted to hospital. Diagnosis revealed that he also had leukaemia. After weeks of treatment in hospital, he was getting worse and his family asked for him to be given vitamin C according to the Riordan protocol. The hospital refused. Why? Nothing they were doing was working. What did they have to lose? The family persisted and eventually the hospital acceded to their request. The patient started improving immediately. However, after a few days there was a change of doctor and the treatment was stopped. The family eventually got the patient home and resumed the treatment. He made a full recovery and not only did he get rid of the swine flu, but he was also cured of the leukaemia. His story was featured on 60 Minutes. Had he been left to the ministrations of the doctors and the hospital he would no doubt be dead. In this case the risk to the patient was

entirely due to conventional treatment not alternative treatment.

Of course I acknowledge that just because something is called “complementary” or “alternative” does not automatically mean it works or even that it is safe. But, by the same token, just because something is “conventional” does not automatically mean it works either. Everyone needs to take responsibility for his own health and well-being and not just place blind faith in a medical practitioner – conventional or alternative.

In the section “Adverse events data” (p10), it is stated that “it is difficult to source data relating to the numbers of adverse events”. While this may be true, I would suggest there may be two reasons. The first is that patients might not report; the second, (and just as likely reason) is that there might actually be few adverse events. Further, why is it an automatic assumption that the alternative treatment was the cause of an adverse reaction? There are far more adverse reactions arising from conventional treatments. A quick perusal of the Physicians desk reference and the US Adverse Effects Reporting register will confirm this.

The section goes on to cite the case of a coronial investigation in 2016. That is a death that could have been prevented but the problem was not the fact that it was an alternative treatment but the way in which it was performed - which is a regular medical procedure. This citing of the coronial investigation in this way is very misleading and I am sure many more cases could be cited of failures arising from conventional treatments, e.g. wrong limbs being operated on, wrong organs being removed, wrong diagnoses being made, etc.

A major concern I have about the draft guideline is that it perpetuates the artificial distinction between different methods of patient treatment, This dichotomy between “conventional” and “unconventional” medicine and therapies is, I believe, unnecessary, unnatural and undesirable.

A doctor is meant to be acting the best interest of his patient. If the cure of some illness can be best achieved by “alternative” treatments or a combination of conventional and alternative treatments, why should the doctor not prescribe that treatment? Why is there such inbuilt resistance to anything which is not part of the conventional mindset? The medical industry repeatedly stresses that it only uses proven science in researching and administering treatments. Surely the scientific method requires that current theories and practices be continually questioned and where possible improved? It was only a little over 150 years ago that a doctor questioned why so many women were dying after childbirth and recommended that all doctors wash their hands and sterilise their instruments. Instead of being hailed as the discoverer of a solution to many inexplicable and unnecessary deaths, he was howled down and criticised - and doctors refused to wash their hands. One can't help but wonder whether this attitude is still prevalent today and prevails against anyone who champions a treatment at variance with the conventional wisdom.

An example of this is the attitude towards vitamins and mineral supplements. Just about every official document dealing with vitamins and minerals repeats the vague and unverified statement that they are of little use and merely produce “expensive urine”. While some vitamins and minerals may end up in urine, even if only 10% was absorbed by the body, that is 10% more than if the supplements were not taken. There are published recommended daily intakes of vitamins and minerals but no thorough studies have been conducted to confirm what the real daily intake should be in order to promote vigorous good health. The published RDIs are merely those necessary to avoid disease (e.g. scurvy). To say that supplements are of little use would seem to ignore the modern lifestyle. We have been told to avoid sun and to “slip, slop, slap” sunscreen. Combine this with our indoor work and lifestyle and most people are deficient in vitamin D. In fact, the Qld Health Department recently noted that they are seeing cases of rickets caused by vitamin D deficiency. Our fruit and vegetables are artificially fertilised, sprayed with pesticides, picked early and ripened in storage - hardly practices conducive to good nutrition and health. They are deficient in vitamins and minerals simply due to the modern farming and marketing practices. I remember many years ago walking past fruit shops and experiencing the strong smell of fresh fruit. That does not happen these days unless you grow your own fruit and vegetables. Surely supplements are necessary to make up for what our food lacks?

Where mainstream “studies” are conducted on supplements they are contrived to produce a result that confirms the conventional view. For example, studies of vitamin C's effectiveness in

alleviating flu and cold symptoms use minimal amounts of the vitamin. Any real “alternative” study stipulates large quantities (e.g. 3000mg) taken often (e.g. every hour or two). To date there have been no deaths from Vitamin C consumption whereas there have been thousands of deaths worldwide from prescription drugs. Everyone I know of who has had a flu shot invariably gets the flu. Further, a person who once worked in an aged-care facility commented that each year after receiving the flu shot, “the oldies dropped like flies” over the next month or so. The numbers of them becoming ill, disorientated and dying increased enormously after each round of vaccinations.

In the interests of patient health, medical practitioners should not be frowning on alternative therapies and supplements but should be studying them to see what works and why it works. I know of people with dementia who were fortunate enough to be treated by a doctor who recommended they take Vitamin B, in particular Vitamin B12. Their dementia condition improved noticeably as a result but you will not read about these things in most conventional medical journals. Why not? Could it be that vitamins can’t be patented and thus there is no money to be made by the pharmaceutical companies?

Much is said of the alleged lack of peer reviewed evidence for alternative therapies. But if someone puts forward a paper which presents findings that do not correspond with the “conventional” view (such as those relating to vitamins B and C), is that paper going to be published?

In recent years the editor of a well known medical journal (the New England Journal of Medicine) resigned because, as she said, “It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgement of trusted physicians or authoritative medical guidelines.” This is mainstream medicine not fringe or alternative medicine. In fact, from personal experience I know that medical students are taught how to deal with patients who take vitamin and mineral supplements and told how to discourage them from supplementation. This is a very rigid and unsatisfactory method of promoting patient health.

While it is true that there are some alternative medicine “quacks” who are unscrupulous and only interested in making as much money as they can, is it not just as true that there are some unscrupulous conventional medical practitioners? Many alternative medicine practitioners have a genuine knowledge of, and interest in, restoring and maintaining health. They are interested in treating the disease rather than just prescribing drugs to mask the symptoms. It would be unfair to discriminate against all alternative health practitioners simply because they are offering services which are outside mainstream medicine.

The draft paper states that the Board will review the guidelines at least every 5 years. Is this necessary? Does it mean that the guidelines are so poorly drafted they need constant review? Or is the intention to introduce the guidelines and then to progressively tighten them to restrict what practitioners of alternative medicine are allowed to do?

In summary, I offer the following.

I do not believe the guidelines solely targetting practitioners of alternative or unconventional treatments are necessary. If, however, the guidelines are promulgated, I would like:

- a) a list of the types of stakeholders and the names of those representing commercial interests such as pharmaceutical companies listed in the guidelines, either as a foreword or as an appendix;
- b) a definition of conventional medicine in the guidelines
- c) the guidelines to be redrafted so that they apply to **all** medical practitioners regardless of their preferred modes of treatment;
- d) no restriction to the free exercise of the rights of medical practitioners to treat via unconventional or emerging treatments;
- e) a clause added to the guidelines which prohibits the guidelines from ever being modified to restrict or eliminate the rights of practitioners of unconventional or emerging treatments.

Again, thank you for the opportunity to provide a submission on the proposed guidelines.



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**From:** [REDACTED]  
**Sent:** Tuesday, 5 March 2019 6:19 PM  
**To:** medboardconsultation  
**Subject:** integrative and alternative health care

Medical Board Submission

Regarding the public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments

As an Australian citizen/resident I feel it's important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

I have been suffering from:

Conventional medical doctors have not been able to successfully treat my condition(s) and bring me to a satisfactory level of health.

Pharmaceuticals and the use of conventional methods simply did not work (and in some instances also delivered unwanted side-effects in my case) and, seemed to waste Medicare funds and resources.

It was only when I saw an integrative medical doctor who included lifestyle change, diet and supplements of vitamins and minerals to address my problems that my condition began to improve.

If I cannot see an integrative doctor, or the Doctor is restricted in what he or she is able to prescribe for me, I feel that my health will deteriorate and have a continuing impact on my family, my work, and my wellbeing.

Additional notes:

My child who was extremely unwell with many hospital visits and stays was told he would have a lifetime of medication for his condition, which in the long run would shorten his life.

I decided that was NOT good enough, so found alternative assistance, which not only got my child off the medication, he has never been sick since that time. Yes the alternative path takes time, but I believe as parents we have the absolute right to decide what is best for our own children with health care.

This scenario where I have chosen to stay out of the medical system because I chose to invest in myself with wellness and many therapies to support that, is MY RIGHT. I have not been a burden on the system at all,

I believe what you fail to understand is that people who go down the path of alternative therapies, choose a healthy way of living, they work on mindset, happiness, healthy food, exercise, stay away from unhealthy habits. there is a conscious commitment to being well.

Concerned,

Name: [REDACTED]

Signature: [REDACTED]

Date: 5 / 3 / 2019

Occupation: (optional)

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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 1:20 PM  
**To:** medboardconsultation  
**Subject:** Fwd: Consultation on complementary and unconventional medicine and emerging treatments

Dear Sir,

In regards to the subject line, I choose Option 1...no new regulation required for doctors practicing in areas of integrative medicine.

I had chosen to see Integrative practitioners after seeing multiple GPs, 9 specialists for many years and being put on 4 immunosuppressants, many antidepressants, many pain killers and drugs of addiction/harm, years of counselling and being looked at like a mental case each time to look what else may work outside the box. Had many diagnosis given by each specialist I saw, many tests done and many medications tried for many years.

Eventually, I found dietary changes fixed my blood markers -- became normal in 3 months which many years of 4 immunosuppressants did not; leave alone the toxic side effects I had.

I was told I have Depression, Anxiety, Panic attacks. I was given many antidepressants, name one and I have taken it. I was under multiple psychiatrist care, with one of them for 9 years. Counselling with many psychologists. I was told I might have to be on the medications for life. I am not.

I was told I have Chronic Fatigue Syndrome, Fibromyalgia and have no cure. I don't have it any more.

I was told I have Hashimoto's thyroiditis and will be hypothyroid and remain on thyroid pills for life. I am not.

I was told I have a connective tissue disorder and will have to remain on toxic medications for life. I am not any more and my symptoms are 80% better.

Finally I found someone trained in Nutritional and Environmental medicine and things started improving from there. Someone had time to look into details of WHY instead of just prescribing another pill. Someone who gave time and personalised care. And gave me herbs, nutrients and detox techniques which have no side effects. Working Integratively on my complete environmental, physical and emotional health has been an empowering journey. A lot of stealth infections and environmental toxins were causing my symptoms and their guidance helped me come out of my deep ditch and get back into work force.

I am surprised such doctors are being harassed instead of being rewarded.

Regular GPs have a role for quick fix conditions but for chronic

complex cases, we need more qualified physicians with broader knowledge base and open mind.

There is no need for further regulation of Integrative GPs. It would be more inclusive and accepting of any system wanting to improve and help to listen to the consumers and see why they are choosing to go outside the box. It would be very desirable that conventional medicine opens its views on non pharmaceutical approaches that work as well.

Also we need to know as patients why this consultation came into place. Transparency in this is important to me as a patient. In democracy, we need all regulatory bodies to be regulated as well.

Regards

A solid black rectangular box used to redact the signature of the sender.

## **Consultation on complementary and unconventional medicine and emerging treatments**

I have been consulting a complementary / integrative medical practitioner for over 10 years.

I had a number of conditions that my standard GP was unable to help me with, particularly chronic fatigue syndrome , fibromyalgia and other related conditions.

My integrative doctor successfully treated these conditions to a point where they have minimal impact on my life. I have been given tools and knowledge to maintain my good health.

My integrative doctor and my GP at times worked together and shared information about my test results and treatment. My integrative doctor has referred me to medical specialists including an endocrinologist, neuro surgeon and muscular skeletal specialist along with a number of other practitioners.

We are all individuals and our health needs are different. Mine don't appear to always fit so well into 'mainstream' medicine . I know I would not have achieved the results I have without access to my integrative doctor. My medical treatment is well balanced and I am treated as a whole person.

I cannot emphasise enough how important it is for me as an individual, and for my continued good health and well being, that I continue to be able to access integrative therapy with my doctor.

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**From:** [REDACTED]  
**Sent:** Thursday, 28 March 2019 3:28 AM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

Dear Sir / Madam,

I write to add my submission to the Medical Board of Australia's inquiry into the regulation of emerging treatments.

I am a 52 year old sufferer of the ME/CFS disease who has been bed-bound for 15 years. There has been relatively little in-depth research into what is a complex disease, and there are no treatments that have been shown to cure the disease.

There are however some off-label and compounded medications that have been shown overseas to improve certain symptoms of the disease. I have had Australian Doctors (both GP and Specialist) prescribe such medications, which have had some benefit to me.

Whilst I understand the boards impulse to crack down on some of the "nutty" treatments that some Doctors may advise their patients to undertake, I urge you not to throw the baby out with the bath water and outlaw the prescription of off-label and compounded medications for which there is a plethora of overseas evidence and experience.

Sincerely

[REDACTED]  
Address: [REDACTED]

Phone: [REDACTED]

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**From:** [REDACTED]  
**Sent:** Friday, 28 June 2019 5:45 PM  
**To:** medboardconsultation  
**Subject:** Submission re Complementary and Unconventional and Emerging Medicine

Dear Sir/Madam,

My name is [REDACTED], 76 years old and reside in New South Wales.

I have used Complementary medicine through various means for most of my life. I believe I have been fortunate to have found doctors who have used Complementary or Unconventional or Emerging Medicine even if this was not publicly known.

Recently I have used a doctor who advertises as such a doctor and he always provides me with all alternatives to my treatment, commencing with conventional responses, but when queried by me, does suggest alternatives through discussion. I, personally, often refuse to use conventional medicines because I often have very negative responses to the medications and then do not take them.

I respond quite well to complementary medicines. In spite of my age I have only once been to hospital - after tripping over a raised pavement and falling and breaking my wrist. I entered the system as a private patient and therefore it did not cost the taxpayer anything.

I am not on medications for heart, high blood pressure, diabetes or any other of the main issues which cost our health system considerably and I believe that is because my doctor suggests other options after telling me I should trial a particular medicine, but on my refusal will give me the option of an alternative, as well as lifestyle suggestions.

It seems to me that this intended change in the regulations is placing Australia in a very negative position within the world medical systems. Even in the US it is possible to choose an Integrative health professional.

I strongly request the Medical Board of Australia to reconsider its proposed new set of regulations and allow me my rights to choose the medical treatment of my choice, and to continue with the current existing guidelines for Medical practice in Australia.

Yours sincerely,

[REDACTED]



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**From:** [REDACTED]  
**Sent:** Friday, 28 June 2019 12:52 PM  
**To:** medboardconsultation  
**Subject:** Guidelines for 'complementary and unconventional medicine and emerging treatments'

To Whom it may concern,

I'm writing regarding the proposed new guidelines for 'complementary and unconventional medicine and emerging treatments'. I am concerned that if adopted, it may threaten Integrative Medicine, and more importantly, that my right to determine my own medical care is under threat.

I rely on Integrative Medicine for my health & wellbeing. Without it, I suffer from a range of conditions which conventional medicine could not treat. My health was deteriorating and my GP could not explain, nor offer any treatment for the cause of my multitude of symptoms. If I hadn't found Integrative Medicine, I'm quite sure my health would have deteriorated further, and with more serious consequences.

I understand a growing number of people rely on Integrative Medicine and it should be a valued and protected option for everyone in the community.

On reading feedback surrounding the new proposed guidelines, some points of concern include:

- The only concern of the Medical Board of Australia in this process is, and should be, safety. The Chair has said this publicly. Questions about how effective Complementary Medicine and Integrative Medicine is should be a decision left to me.
- The Medical Board of Australia includes members of the Friends of Science in Medicine, a political lobby group opposing Complementary Medicine and Integrative Medicine. This is a clear conflict of interest. The Medical Board of Australia should cancel the current consultation, and go back to the start with all current and past members of the Friends of Science in Medicine lobby group excluded from Board participation.
- There has been no transparency in consultation process. Freedom of Information requests as to how these proposals originated have been denied or redacted. The Medical Board of Australia has acted in secrecy and a failure to disclose the details of why the new regulations.

I urge you to reconsider your approach and provide more transparency, more appropriate consultation, and more appropriate guidelines which may benefit our community.

Regards  
[REDACTED]



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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 11:09 AM  
**To:** medboardconsultation  
**Subject:** Consultation on Complementary and Unconventional Medicine and Emerging Treatments

Hello,

I am writing to you with great concern about the proposed review of Integrative Medical Doctors.

These professionals - doctors who elect to continue to research and study ancient and contemporary medical modalities, are invaluable to many people in Australia.

They have a passion to investigate, to evaluate and come to understand the best modalitie/s to work with their patient in the process of attaining the highest level of health and well being as possible for their patient.

For those of us with chemical and drug (prescription) sensitivities the option of eg. acupuncture, antioxidants and herbs to support the body in reduction of inflammation is essential to attaining a level of functionality that taking eg IBobrufen to reduce inflammation, does not permit.

The MIMs rgister is enormous - the register of drugs and their side effects. There are tens of thousands of cases of mis prescribing, over prescribing, ommiting natural practical advice such as nutritional changes etc , basically of prescription pharmaceuticals and invasive medical procedures that have been directly attributed to the unfortunate and huge numbers (recorded statistics) that range from demise in health to death.

Integrative medical doctors and many ancient medical modalities that the AMA might call 'alternative' have been around, some for thousands of years such as acupuncture. That is a great deal longer testing ground to perfect the treatment of illness and dis-ease than we have with pharmaceutical and invasive medical procedures and tests.

In the past in China, the Dr's would only get paid if their clients were healthy. A Dr was deemed to not be a good Dr or performing his duty of care ie. keeping the client healthy, if in fact they became ill. This is an example of a true 'Health System'. The one we currently call a health system here in Australia is more of a 'sickness system' because the population is not becoming healthier, they now have a growing list of chronic illnesses - mental, phsucal and emotional, and now even our young children are presenting with chronic 'unexplainable' and debilitating illness's.

For me this is not good enough to call a health system, but if that's what a percentage of the population chooses for their medical support so be it.

For those of us who don't choose the 'conventional' medical support path of invasive, 'mandatory' tests and procedures and pharmaceuticals, to suggest that an integrative medical dr should be treated differently (other than more highly esteemed), is discrimination. Firstly against the good doctors who work hard to research and learn to be able to bring the best treatments to support the health and well being of hteir clients, and secondly it discriminates against those of us in the population who want to and need to choose medical support from someone who has actually studied nutrien etc and can offer us modalities that DO actually support us.

How a medical system can have registered doctors without them having an extensive and up to date knowledge of the bodies functioning and nutritional needs (such basic foundations from which to treat any dis-ease of the body from) begs to question whether it is a true medical system or simply a venue to distribute pharmaceuticals and fund expensive equipment.

Please don't get me wrong. I have worked as a registered nurse within the medical system and have seen many wonderful Dr's, pharmaceuticals and tests etc saving lives. I spent a lot of time in Intensive Care and Burns Unit, theatre and Emergency. But I have also propped up doctors (professors) who were over the limit (alcohol) for driving let alone to perform an operation. I have watched a team of doctors ,every day, come into ICU and play russian roulette with heavy duty antibiotic combinations that were prescribed to be administered to already extremely ill people. Yes, they changed the comination of the antibiotics EVERY day. It was obvious even back then that this was at best, very risky and unpredictable. I understand this has been one of the reasons cited for the super bug situation we now have - Indiscriminate prescribing of antibiotics'.

To affect in any way my freedom to choose the doctor and health modality that suits my physical needs could be viewed in a court as discriminatory.

I have EHS, Electro Magnetic Hypersensitivity, among other chronic conditions that severely impact on my daily health and well being and alopathic medicine does not help me. I tried that path.

Integrative medicine benefits me enourmously and is the only form of health care that supports me to have a level of functioning wellness.

Doctors of Integrative medicine need the same guidelines as doctors of 'conventional' medicine. The only change I would highly suggest is that ALL doctors MUST study nutrition extensively, and disease Prevention, supportive natural lifestyle modaities and have an understanding of the ancient, proven modalities of ie. acupuncture, homeopathy (it's good enough for the royal family) and herbal plant based medicine just so they have a broader range of understanding of the true health needs and potential support for their clients.

Blinkered doctors are potentially dangerous to trusting and ignorant clients.

I trust you will make a very wise decision regarding this proposal of the AMA and stand for the rights of all people to choose health modalities that are proven, beneficial and used extensively with outstandingly excellent results, yet outside what you choose to call 'conventional' medicine.

Please confirm receipt of this submission dated 30th June 2019.

Thank you

Kind regards



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**From:** [REDACTED]  
**Sent:** Sunday, 7 April 2019 10:17 AM  
**To:** medboardconsultation  
**Subject:** submission to the MEDICAL BOARD of AUSTRALIA

To Whom it may concern,

my name is [REDACTED] I am 61 years old and my address is  
[REDACTED]

I was diagnosed with an aggressive form of breast cancer in 2018.  
In January 2019 I had mastectomy with dissection of first level of lymph nodes.  
I have used Complementary or Unconventional or Emerging Medicine for a long time and I value enormously its availability and I am very happy with its practice.

My Doctor always provides discussion about option for treatment and their relative merits and potential problems in addition I always appreciate the value of free choice in making my decision over my medical treatment.

My preferred choice of outcome is OPTION 1, retain the status quo.

That if the Medical Board eventually decides to choose Option 2,  
for greater regulation, that it be modified from the current proposal  
to ensure that it applies to ALL medical practitioners with the same onus of exhaustive exposition of all treatment options, research etc,

and

that the BOARD accept that Integrative Medicine, utilising Complementary or Unconventional or Emerging Medicine as well as conventional medicine,  
be recognised as a Specialty, in order to allow increased Medicare rebates to help[ to cover the increased costs of fulfilling the new regulation.

[REDACTED]

7 April 2019

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**From:** [REDACTED]  
**Sent:** Tuesday, 9 April 2019 4:47 PM  
**To:** medboardconsultation  
**Subject:** Response to Proposed Changes to Patient Choice

To Whom it May Concern

I cannot believe that we are going back to the bad old days of the 1950s, 60s, 70s and 80s prior to the availability of Doctors working in Integrative Medicine and Naturopaths.

There appears to be no understanding of what these professionals offer, it is treatment that complements our General Practitioner care, they ARE NOT in competition.

I have had the benefit of care following a Colonoscopy Procedure that went very wrong, when I ended up in the Emergency Department in the middle of the night two days following my first and only Colonoscopy with constant diarrhoea. The GP did his best by telling me not to eat many foods which was not successful. On returning to my Gastroenterologist he said he did NOT KNOW what to do.

After visiting a skilled Naturopath for over 2 years and taking specific Pro Biotics it gradually improved but it had affected my general feeling of wellbeing.

The issue here was that no one seemed to know how to treat it as it was from a medical procedure. I was in perfect health prior to this

As a result I still continue to take probiotics to keep my gastro system manageable. I do not know what happened during that medical procedure to cause such an ongoing medical problem and no one wants to own it.

The move to Integrative Medicine is a move forward in health care but all of a sudden you want to move medicine backwards again.

Please reconsider this very backward proposal so health care can move forward in this 21<sup>st</sup> Century

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Saturday, 29 June 2019 7:12 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To whom it may concern,

Regarding the consultation on complementary and unconventional medicine and emerging treatments, I am concerned that the changes proposed may leave me without sufficient medical treatment for my severe and long-term chronic illness of the past twenty-two years, a condition that has left me bedridden or housebound and unable to care for myself from the ages of 23 to 45. My experience with conventional GPs has been that they inevitably tell me they my situation is beyond their expertise and that I should seek help from someone who knows more about my condition. However, when I have been referred to specialists, they have also been unable to provide treatment. This is the situation that led me to an integrative medicine doctor, from whom I have received treatments that have helped to improve my condition.

Furthermore, I require long consultations, usually of an hour or more, in order to deal with both my long standing condition and the complications that I am increasingly having. Even when I catch an ordinary infection, where most people would simply be able to go to a GP, I require a doctor who can take the complexity of my condition, my full history, past complications, bad reactions to certain medications and my weak immune system (blood tests have consistently shown me with low white blood cell counts and sometimes anaemia, but with no apparent cause) into account before suggesting treatment.

Without the choice of an integrative medicine doctor, I would not be able to access the medical treatment I require, and given the extent of my illness and severe disability, this would place me in a desperate situation. I would ask that you fully consider the situation of chronically ill patients before making any changes to the current regulations. I choose option 1: that 'no new regulations are required for doctors practicing in the areas of complementary medicine and integrative medicine'.

Your sincerely,

[REDACTED]



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**From:** [REDACTED]  
**To:** [medboardconsultation](#)  
**Subject:** "Consultation on complementary and unconventional medicine and emerging treatments".  
**Date:** Saturday, 22 June 2019 10:41:56 AM

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Dear MBA,

I am writing to oppose the new regulations proposed in the above consultation. I myself as a GP was failed by conventional medicine which had no answers for my collection of symptoms, despite extensive investigations and conventional treatments.

- I was only able to get back to full health and full functioning (as a GP and mother of 7 using Complementary and Integrative Medicine which included a mix of:

Vitamins/minerals/herbs/other  
supplements

Intravenous vitamins

- If Complementary and Integrative Medicine treatments were to be changed or ceased, my health is likely to deteriorate and I would no longer be able to fully function as a GP and mother.

- I fully believe it should be my choice on what treatments I wish to choose.

The current regulation with the Medical Board is adequate to address any issues that may arise with a Complementary and Integrative Medicine Doctor.

Thank you.

Best wishes, [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

## Consultation on complementary and unconventional medicine and emerging treatments – Discussion Paper- February 2019.

Name, age, state of residency:

██████████; Age 70; NSW

My interest in this area is as a parent with some family members with a chronic long-term illness (ME-CFS; Myalgic Encephalomyelitis - Chronic Fatigue Syndrome) and acquainted with many sufferers of this and other long-term illnesses. I am also a scientist, although not in the medical field, and I recognise both the value of sound science feeding into decision-making and the limitations of science. We are also users of conventional medicine as well as some aspects of the unconventional medicine covered by this report.

Modern medicine has made many breakthroughs over the years and has greatly benefitted society and improved the quality of life of many people. From first-hand observation, however, I note that conventional medical approaches are woefully inadequate to deal with chronic illnesses in general and ME-CFS in particular and there seems to be a failure to recognise the limitations of medical science in translating the science to patient treatment. It seems to be a tendency for the current system to so easily blame the patient and/or the parents if the ME-CFS patient does not improve using the very limited “standard” tools at their disposal, usually cognitive behavioural therapy (CBT) and graded exercise therapy (GET). Hence, one is forced to try to manage the multiplicity of debilitating symptoms outside of the conventional medical system as much as possible, recognising that there is currently no “cure” for ME-CFS, and cautiously moving forward with what gives some relief. I will describe more on our positive experiences with Integrative Medical Practices later, after giving some examples of conventional medicine approach. Please note that this is not a blanket criticism of conventional medicine, which our family has also benefitted from.

### **Experiencing the limitations of conventional medicine:**

Some time ago a family member, as an adolescent, contracted ME-CFS after a bout of glandular fever. About a year later, she became ill enough to be hospitalised and spent many months in and out of two NSW hospitals over more than a year. In each hospitalisation she was subject to a program of CBT and GET using a “team” approach, which failed to consider the patient and had her doing activities well beyond her capacity. The result was that each hospitalisation caused deterioration in her condition and a scramble by the hospital to stabilise her condition. The repeated cycle led her to the stage of her eventually refusing to re-enter hospital for another unhelpful program. Such a program was allegedly the “standard” approach for treatment of ME-CFS but there was no acknowledgement of the limitations of the science when applied to patient treatment and patient feedback was not recognised. Psychiatrists associated with the hospitals, who should have been supporting her in her condition, labelled her with such terms as “*pervasive refusal syndrome*”, she was “*too adapted to her invalidism*” and she “*shows a steely resistance to staff trying to encourage*”(she was unable to do the activities). We, as her parents, were labelled by written comments such as: our daughter “*showed excessive invalidism ..... promoted by her parents*”; that “*parents ... firmly convinced of organic cause for [her] symptoms*”. These negative attitudes also filtered through to some nursing staff.

The upshot of her refusal was that she was ordered to attend a hospital meeting, along with us, her parents, and ordered to endure another program of CBT and GET or we would be notified to the Department of Community Services, as FACS was at the time. One conventional medicine Specialist gave her a cursory examination and

said that she no longer had ME-CFS but it was now a “*psychosomatic disorder*” – i.e. it was in her head, while she was told that, in the program run by psychiatrists, she would just have to “*push through*” her symptoms, regardless of the tachycardia, nausea, vomiting, extreme fatigue and other symptoms. She would not agree and we were notified, although the case was thankfully dropped after many agonising weeks. It is interesting to note that we were put in touch (with ethical hospital supervision) with three families that had gone through the “program”: one said it made them worse; one said they didn’t want to talk about the experience; and the third did not contact us. In a much later hospital admission for other reasons, her CFS and its debilitating effect was not taken into account and there was no contact with her treating family doctor.

This is a scenario that is repeated worldwide, with many tragic consequences. At a medical conference some years ago, we were chatting with an overseas paediatrician, who was well aware of ME-CFS and its misunderstanding and mistreatment, and before we had stated our situation, he outlined from his experience almost identical treatment of adolescents with severe ME-CFS, and their families. Had I not known better, I would have thought he had read our hospital notes.

### **How does evidence-based medicine lead to this?:**

As a lay-person in the medical field I can only speculate, but with scientific training and over 40 years experience in another field, and my family experience (only some of which is outlined above), I believe that my assessment may have merit. In my scientific field, we try to gain a picture of what is happening in the environment by sampling, laboratory testing (both chemical and biological) and statistical extrapolation. The science then informs the process to protect the environment.

Thankfully, one cannot do destructive sampling and extrapolation in human medical research and medical science moves forward by animal analogues, very small-scale human trials, expensive randomised, double-blind trials and occasional large-scale epidemiological studies after the event. For some chronic conditions, the limited science can lock in a treatment regime that may not fit many sufferers. Unfortunately, medical progress follows the funding, and in the area of ME-CFS in particular and in complementary medicine in general, the funding is extremely limited and, for ME-CFS is mostly directed to psychiatric studies that perpetuate GET and CBT as the “standard treatment” for this multi-systemic and debilitating illness, thereby leading to the situations described above. There are only a few places in Australia and worldwide that focus on biomedical research into ME-CFS.

My son also has ME-CFS with increasing severity and visited a “conventional” specialist researching ME-CFS using CBT and GET, who was across the other side of our city. Recognising the difficulty of getting there and back, let alone undertaking the program, my son asked what happens if a participant is unable to complete the program, to which the specialist replied along the lines of, then they didn’t have ME-CFS in the first place! To me, it seems like circular science to eliminate any results or patients that don’t support the study but, unfortunately, this further reinforces the use of GET and CBT in conventional medicine, as well as the myth that it is all in ones’ head (despite caveats from the researcher that it isn’t).

Added to this scientific limitation of conventional medicine is the system of “specialists” in different fields. Society certainly needs specialists and they contribute greatly to better understanding of conditions and medical progress in many fields. However, for severe ME-CFS (and some other illnesses) the symptoms cover a wide range of manifestations, including post-exertion fatigue, muscle pain, total body pain,



sleep disruption, severe digestive problems, disabling headaches, skin rashes and irritation; sensitivity to light, noise and chemicals; cognitive impairment; and many others. Such is the nature of this illness that isolated treatment of one issue, even if successful, often disrupts one or more of the other symptoms.

Given that medical research is often expensive and research effort is often focused where the money is, the result will often be a skewed approach to less well-understood and complex illnesses, such as ME-CFS and many other chronic illnesses. Looking at the history of medical breakthroughs, there is often a long lead-time before research is translated into clinical practice, and there can be loss of time due to resistance from vested interests or practitioners that are used to a particular approach. Hence “evidence-based” science is not a level playing field in medicine.

I refer to a very recent survey that, although it fully acknowledges its limitations, does tend to support the patient perspective that I have outlined above and provide necessary caution on imposing a treatment regime supposedly based on scientific evidence. It can be found:

URL:

[https://www.actionforme.org.uk/uploads/images/2019/04/Final\\_Consolidated\\_Report.pdf](https://www.actionforme.org.uk/uploads/images/2019/04/Final_Consolidated_Report.pdf)

Ref:

<https://www.actionforme.org.uk/news/results-of-the-forward-me-survey-for-cbt-and-get/>

<https://www.meassociation.org.uk/2019/04/forward-me-and-oxford-brookes-university-announce-results-of-patient-survey-on-cbt-and-get-in-me-cfs-03-april-2019/>

### **Our experience with Complementary and Integrative Medicine:**

Given our experience with at least two family members, as well as knowledge of many other chronic sufferers who have been failed to varying degrees by the system of conventional medicine, we could be forgiven for seeking alternative approaches; not false quackery but an integrated approach that looks at the whole patient, that takes into account advice from conventional specialists, that uses conventional medicines along with, where appropriate, supplements and vitamins and other approaches, and that monitors the patient's health, providing feedback and changes where needed. We recognise that there is no cure for ME-CFS, even with such an approach but our experience with Integrative Medicine has been positive and we feel that the patient is listened to and the approaches flexible, as the doctor provides adequate discussion about options for treatment, relative merits and any potential problems of any treatment regime suggested. We have had a number of experiences with Complementary Medicine and, as the treatment choice remains with us and we can refuse treatment (which hasn't always been possible with conventional medicine) and ask for more information, we have been happy with the treatments.

### **Specific questions where the Board is inviting feedback on the issues and options outlined in the discussion paper:**

1. Do you agree with the proposed term 'complementary and unconventional medicine and emerging treatments'?
- If not, what term should be used and how should it be defined?

I am quite puzzled by the inclusion of emerging treatments in this attempt to limit such approaches. We recognise that patients do not want to unwittingly be guinea pigs for medical research and there are ethical considerations around using patients as trials. However, medical science needs to advance on a number of fronts

simultaneously (especially given some of the limitations touched upon above) and, as long as patients are aware of risks of 'emerging treatments', then treatments that are not likely to cause harm can be a win for some patients and a win for advancing medical practice. We have not seen any such problems in this area in our experiences with Integrative Medicine. In conventional treatments, our experience highlights that those imposing the treatments are most unwilling to receive feedback from the patient or their family and to modify the treatment accordingly.

2. Do you agree with the proposed definition of complementary and unconventional medicine and emerging treatments – 'any assessment, diagnostic technique or procedure, diagnosis, practice,<sup>4</sup> medicine, therapy or treatment that is not usually considered to be part of conventional medicine, whether used in addition to, or instead of, conventional medicine. This includes unconventional use of approved medical devices and therapies.'

If not, how should it be defined?

Emerging treatments should not be in the mix at all. Other than that, I am not able to provide a better definition at this stage.

3. Do you agree with the nature and extent of the issues identified in relation to medical practitioners who provide 'complementary and unconventional medicine and emerging treatments'?

As stated above, I have only had positive experiences with Integrative medical practitioners for treatment of long-term chronic illness.

4. Are there other concerns with the practice of 'complementary and unconventional medicine and emerging treatments' by medical practitioners that the Board has not identified?

No concerns that I have run across. Has anyone worked out if the prevalence of such complaints is any greater than in the general medical profession? If cost to patients is an issue, then the proposed Option 2 would only increase costs for such treatments; unless (cynically speaking) that is the aim. If that is so, it seems a misguided over-reach.

5. Are safeguards needed for patients who seek 'complementary and unconventional medicine and emerging treatments'?

Again, all medical patients need safeguards and I question whether the danger is particularly more prevalent in such treatments, and if there are some problem areas, can any intervention be better targeted? It would seem that the dangers of misplaced conventional medicine could well be greater than any problem being tackled here. We need more doctors who are prepared to work more broadly with patients with chronic illnesses and who take into account patient feedback.

6. Is there other evidence and data available that could help inform the Board's proposals?

Not that I am aware of, except for the specific survey cited above, which cautions the imposition of treatments that may be based on incomplete or lop-sided evidence.

7. Is the current regulation (i.e. the Board's *Good medical practice*) of medical practitioners who provide complementary and unconventional medicine and emerging treatments (option one) adequate to address the issues identified and protect patients?

I believe that Option 1 is adequate. If particular problems are identified, then a more targeted approach is as much as is needed. I do find it valuable to have free-choice in making my decisions over my medical treatment and that of my family. Complementary medicines are regulated by the TGA.

8. Would guidelines for medical practitioners, issued by the Medical Board (option two) address the issues identified in this area of medicine?

As stated above, I feel that Option 2 is an over-reach and diverts unnecessary regulatory attention to this field of medicine. The paper does not acknowledge the failure of conventional medicine in a number of areas, particularly failures in treatment of chronic illnesses,.

9. The Board seeks feedback on the draft guidelines (option two) – are there elements of the draft guidelines that should be amended? Is there additional guidance that should be included?

I do not see that Option 2 is a sensible way forward and it shows an inbuilt bias against such approaches.

10. Are there other options for addressing the concerns that the Board has not identified?

As stated above, if particular problems are identified, the Board's approach should be tailored to address those particular problems, instead of casting an inhibitory cloud over the whole variety of practitioners.

11. Which option do you think best addresses the issues identified in relation to medical practitioners who provide complementary and unconventional medicine and emerging treatments?

That if the Medical board eventually decides for option 2 for greater regulation, that it be modified from the current proposal to ensure:

1. That the free choice of the patient is fully recognized;
2. That it applies to ALL medical practitioners with the same onus of exhaustive exposition of all treatment options, research etc; and
3. That the Board accept that Integrative Medicine as well as conventional medicine, be recognised as a Speciality, in order to allow increased Medicare rebates to help cover the increased costs in fulfilling the new regulations

I am unable, from my experience, to agree with the paper's assertions that:

Guidelines that define good practice for complementary and unconventional medicine and emerging treatment:

- would not reduce consumer choice
- would not restrict medical practitioners' practice
- would not result in significant cost increases for consumers or medical practitioners
- would not restrict existing, accepted practice that may fall within the definition of complementary and unconventional medicine and emerging treatments
- would not stifle innovation or clinical research and trials.

The proposal for Option 2 seems to work against each of these five points.

## **Submission on “Complementary and unconventional medicine and emerging treatments” – February 2019**

[REDACTED], 67, N.S.W.

Through my life I have used both conventional and alternative medicines and approaches, as have my husband and 4 children and we have found one or other kind to be of more benefit, depending on the problem. Very often a quicker improvement may be achieved from a pharmaceutical medicine but a remedy offered by an alternative, unconventional method may take longer to act but be as effective in the long term and avoid drug therapy and its side effects. With ailments some of our family suffer, including high drug intolerance, it is a safer way to deal with issues. Another issue that our son has is opposite reactions to many pharmaceuticals, e.g. sleeping tablets that stimulate rather than helping him sleep as expected.

In my opinion, conventional Medical approaches can often overlook the importance of the whole body in patient illness, especially chronic illness; for example the importance of diet may be missed. This may be due to a limited training in this area. Referral to a dietician may be of some value but the influence of diet is often not taken into account as a part of the total illness. The Integrative Medical approach takes into account all aspects of care as part of a holistic approach with the patient and provides feedback.

We have occasionally used homeopathy from a separate supplier, sometimes with benefit and some times without benefit but no ill effects but have friends and relations that gain tremendous benefit from its regular use. Also acupuncture is something I have experienced a few times and found beneficial and other relatives have been hugely benefitted by the use of it to counteract some of the side effects of chemotherapy as well as other ailments.

When conventional medical doctors have also offered us alternative supplements because there is good reason to believe conventional treatment will be counterproductive, it has always been after pathology tests, and follow-up tests have been conducted to monitor levels or effects. We fully recognise that only some, not all supplements were effective but we were always given a choice and do not believe it to be in the best interests of patients to make these approaches more difficult to obtain.

Our experience demonstrates that, when dealing with long-term chronic conditions, conventional medical approaches do not have all or a lot of the answers. I believe it to be counter-productive for the Medical Board to penalise these practitioners and approaches because there is insufficient science and insufficient funding for the science to support patient treatment, especially in the area of chronic illness.

I believe that using a mix of both conventional medicine and some unconventional approaches is the best way to deal with chronic illnesses, particularly those that are poorly understood. It should of course always be made clear to the patient what is and what isn't conventional.

I have had valuable treatment with an Integrated Medical Practice, where the doctor openly discusses options, uses conventional medicine frequently and where appropriate and clearly outlines options for treatment with relative merits and potential problems stated. Pathology tests are conducted appropriately and results clearly explained in a holistic manner that takes into account the whole person. I have had good experiences with some conventional medical approaches and some

bad experiences. The latter usually occurs when the doctor/specialist limits choice and applies a one-size-fits-all approach to patients after one short consultation.

I am somewhat alarmed that “emerging treatments”, “emerging therapies” or “emerging medicine” is covered by this report, given that medical treatments only advance with the use of emerging approaches, where the patient is aware of what is being done and is appropriately monitored. What is emerging today may very well be conventional in a few years.

I value-free choice in making my decisions over my medical treatment and I do fear for those who suffer chronic conditions but are unable to receive the care that they should in an Integrated Medical approach if they choose.

My preferred choice of outcome is:

- Option 1 – To leave things as they are so patients can make their own informed decisions as to how they are treated. Practitioners of unconventional medicine should be treated in the same way as conventional practitioners and the services of the former should not be targeted for restriction. Both Integrative Medicine as well as conventional medicine should be equally recognised.

In summary, I believe that using a mix of both conventional medicine and unconventional approaches from an Integrative Medicine approach is the best way to deal with many illnesses, particularly chronic illnesses that are poorly understood.

## **‘Consultation on complementary and unconventional medicine and emerging treatments’**

### **Response Summary: I am against the proposal, and for the status quo.**

I am a Hashimoto's patient, and I am a member of an online support group for this disease.

Hashimoto's disease is a relatively common autoimmune disease. It is a complex disease, and its causes and effects in the body are not completely understood. It is individual in the way it is experienced by patients, with a wide range of symptoms – and the experience of our group demonstrates that it is also very individual in the way it responds to different treatments.

Many of our members are dependent on treatments that would be included in your definition of “complementary and unconventional medicine” for their wellbeing. Although there is an accepted mainstream treatment (T4 supplementation) – it is very clear to our group that this does not work for everyone.

I am concerned that other clauses would restrict GPs, integrative doctors, and other medical practitioners in prescribing or recommending treatments that are low-risk, or which pose an acceptable risk. I am concerned that some clauses in the proposed guidelines increase the professional risk for medical professionals in working through the potential treatments for Hashimoto's with a patient – so that access is further limited to people with this disease. (I already find that it is difficult to access a range of treatments that benefit many of our members – including Low Dose Naltrexone, T3 and NDT supplementation, dietary advice and supplementation.)

Specifically, I am concerned that 2.2, 2.4, 5.1, 5.2, 5.5, 6.1-6.3, and 9.1-9.2, could deter practitioners from recommending the complementary interventions that can be useful for managing our disease.

When poorly managed, Hashimoto's is debilitating. Our online group supports our members through job losses, career termination, marriage breakdown, depression and social isolation – which can be clearly linked to the effects of the disease at its worst. When managed, we lead normal lives – our online community is also full of stories of slow recovery, when members discover the treatment that works for them.

Although these guidelines state that they do not intend to restrict patient choice, I am concerned that some clauses: - 2.2, 2.4, 5.1, 5.2, 5.5, 6.1-6.3, and 9.1-9.2 – could have this effect for our disease.

Therefore, I urge the MBA to take up Option 1, to retain the status quo.

Individual questions are addressed below:

- 1. Do you agree with the proposed term ‘complementary and unconventional medicine and emerging treatments’? If not, what term should be used and how should it be defined?**

Yes.

- 2. Do you agree with the proposed definition of complementary and unconventional medicine and emerging treatments – ‘any assessment, diagnostic technique or procedure, diagnosis, practice, medicine, therapy or treatment that is not usually considered to be part of conventional medicine, whether used in addition to, or instead of, conventional**

**medicine. This includes unconventional use of approved medical devices and therapies.’ If not, how should it be defined?**

The definition as anything “not usually considered to be part of conventional medicine” is very broad, so that the implications of any associated guidelines should be considered in relation to the wide ranging effects that they may have.

**Do you agree with the nature and extent of the issues identified in relation to medical practitioners who provide ‘complementary and unconventional medicine and emerging treatments’?**

I believe that the extent of the issues identified do not really reflect the experience of Hashimoto’s patients with complementary and unconventional medicine and emerging treatments. The standard treatment for Hashimoto’s – T4 supplementation in response to TSH levels – only works to alleviate the symptoms for a minority of our community. Where mainstream solutions fail, there are a range of unconventional/emerging treatments that can be extremely beneficial to our condition, (detailed below.) However, our response to these treatments are varied and individual. It is vital that our medical professionals feel they are not facing a professional risk in exploring these options for each patient.

Many of the beneficial unconventional treatments for Hashimoto’s have *some* evidence for their efficacy, but not the clinical trials that many doctors require as the level they require to avoid professional risk. Often there is a reason that there is a lack of clinical trials. The off-label application of Low Dose Naltrexone (detailed below) is a useful example of a treatment with reasonable evidence of its efficacy and its low risk, where there has no commercial incentive to fund clinical trials.

Many of our community have had transformative success with LDN, and the other treatments listed below. However it is hard to find doctors who will recommend and prescribe these treatments in Australia – some of our members regularly travel thousands of kilometres for appointments. I am concerned that the guidelines will increase the perceived professional risk for doctors in exploring these avenues, which we know to be potentially beneficial, and which I feel have low or acceptable levels of risk in some cases.

Each of the main types of unconventional treatments that are used by our members are useful case studies in relation to the potential impacts of the proposed regulations. These contrast with the examples chosen for Page 12 of the discussion paper, to show how unconventional treatments can be vital for effective disease management, and also have adequate evidence for low or acceptable levels of risk.

### **1. T3 and Natural Dessicated Thyroid**

Many patients who don’t improve on T4 only, will respond to supplementation with T3 or Natural Dessicated Thyroid. I appreciate that its important to be informed of the associated potential risks of this pathway – and monitored. Patients who opt for this therapy make the judgement that any associated risk is manageable, and warranted for its impact on their quality of life. It is important that patients on this medication are able to maintain a long term relationship with a trusted medical professional to manage any risks effectively – and it is important that medical professionals are enabled to make their best judgements around this therapy.

I am concerned that 6.1 – 6.3 of the guidelines could deter practitioners from recommending this treatment.

## **2. Low Dose Naltrexone**

LDN is an off-label application of a medication that has been used in addiction treatment for many decades. Although it has transformative effects for many patients with a range of autoimmune conditions, it is rarely prescribed in Australia.

The experience of our support group suggests that this drug works for most but not all Hashimoto's sufferers to drastically reduce symptoms, and to also lower thyroid antibodies.

LDN does not have completed clinical trials for this application. However, we believe that there is sufficient evidence to judge this a low risk intervention. It has been used for decades to treat addiction at doses 10 – 100 times the low dose of this application, and it has minimal side effects at this much higher dosage, with the main one being liver damage.

I am concerned that the guidelines, especially 6.1 – 6.3 could increase the perceived professional risk of doctors in prescribing this, due to the lack of clinical trials. This has the potential to further limiting our access to this treatment. If access is limited, this should be expected to create a demand for a black market source of this drug.

## **3. Diet**

There are a range of dietary interventions that have alleviated symptoms for some of us. The most common is to eliminate gluten from the diet – however some also report benefits from quitting soy, dairy and other specific foods. Some experience progress from adopting an anti-inflammatory diet, such as the Autoimmune protocol.

Quitting gluten is a low-risk, low-cost option that should be considered “worth a try” for Hashimoto's sufferers, given its potential to improve our condition. This is another example of an intervention that does not have supporting clinical trials, but that has the potential for benefit at a relatively low cost.

Because of the lack of clinical trials, medical professionals may feel that parts of the Guidelines – such as 2.2, 6.1 – 6.3 mean that they are exposed to potential legal action in recommending this unproven, but obviously low risk intervention.

Restricting the ways that medical practitioners are able to consult on dietary interventions wont limit patient access to these protocols – however, they will make it more likely that we do so without the supervision and support of our doctors.

## **4. Supplementation**

Hashimoto's can be exacerbated by nutrient deficiencies, and it can also lead to deficiencies in the body. Individuals in our community have benefitted from supplementing with B12, Selenium, Vitamin D, Iron, and others.

The discussion paper lists “inappropriate tests being ordered” as a problem that the new guidelines are drafted to address.

As patients, we know that Hashimoto's is associated with a wide range of deficiencies that can complicate the disease. I am concerned that doctors may interpret these guidelines, including 5.2, as an attempt to limit their testing, allowing them to draw only on evidence from clinical trials, rather than their own experience.



## 5. Testing

The discussion paper lists “inappropriate tests being ordered” as a problem that these guidelines are intended to address. I am concerned that this objective as worded has the potential to apply to many tests that our community find crucial, especially where standard T4 supplementation fails (as is common.)

Many of us find that balancing T4 and TSH levels (standard treatment) does not resolve our ill-health. Other tests – such as T3, and RT3 (not funded by Medicare) are often crucial in determining a course of treatment that addresses the particular expression of Hashimoto’s for each patient. Many medical practitioners are already reluctant to order these tests. Sometimes it seems apparent that doctors are making this decision based on pressure from medical organisations. As patients, we oppose any tightening of the regulations that would place external pressure on a medical practitioner’s best judgement.

The examples of unconventional treatment options are useful to consider in reference to the draft guidelines, in comparison to the list on Page 12 of the discussion paper. Unlike that list, these examples show cases of unconventional treatments where the risk can be judged to be either minimum, or a risk that can be controlled to an acceptable extent. This includes examples of treatments without full clinical trials.

### **3. Are there other concerns with the practice of ‘complementary and unconventional medicine and emerging treatments’ by medical practitioners that the Board has not identified?**

The concerns listed with the practice of complementary and unconventional medicine and emerging treatments should be evaluated in balance with the risks and concerns associated with conventional treatments – as well as the risks and concerns associated with not exploring all potential avenues to manage progressive conditions like Hashimoto’s.

There are risks associated with restricting medical supervision of the unconventional treatments relevant to Hashimoto’s. If Hashimoto’s patients lose access to effective treatments through their medical practitioners this will increase the demand for these treatments through avenues that are not medically supervised. This might include the creation of demand for a black market for medications, as well as motivating patients to experiment unsupervised with vitamin protocols and restrictive diets, based on publicly available advice.

### **4. Are safeguards needed for patients who seek ‘complementary and unconventional medicine and emerging treatments’?**

Many of the safeguards included in the draft guidelines are useful.

I agree with the focus on informed consent, and the requirements for discussion with patients. I also agree with the guidelines relating to conflicts of interest.

However, I am concerned about guidelines that increase the risk for doctors to face legal consequences, or other professional risks, for providing access to complementary treatments.

I feel that the emphasis on evidence for clinical trials will unfairly limit access to treatments for which such studies are less likely to be conducted. Low Dose Naltrexone - as an off-label application

of a legacy treatment - is a good example of a treatment where there is little commercial incentive to fund a clinical trial – but which, on the other hand, there is adequate alternative evidence that this is a low-risk drug.

I think that practitioners could easily interpret clauses in the guidelines – such as 6.2, 6.3,

I am concerned that 2.2 will deter GPs from considering the beneficial complementary treatments (listed above.) Many people can't afford to see endocrinologists – and most Australian endocrinologists are particularly conservative in their attitudes to the listed beneficial unconventional treatments. This is a source of ongoing frustration for many in our community. A possible reason for this bias is that specialists assigned to this condition – endocrinologists – have a professional bias to understanding this disease as a hormone imbalance – whereas many of the effective complementary treatments focus on the autoimmune component. As patients, we hope this is a situation that will change. In the meantime, we're keen to avoid deterring the proactive GPs, and the integrative doctors who are willing to engage with the entirety of our disease.

#### **6. Is there other evidence and data available that could help inform the Board's proposals?**

I would like the experience of patients to be included as evidence in structuring medical regulation and practice.

This is anecdotal evidence, rather than clinical data.

However, a real strength of our online community, is that it has demonstrated to us that the shortcomings of conventional treatment is common amongst Hashimoto's patients – the norm, rather than the exception.

Testimonies that we share prove to each other that there are better options for managing this disease. Treatment is frustratingly individual, and successful management requires a willingness to try different options and evaluate risk.

I would like the board to accept advice from us as a community of over 7000 as a form of evidence that complementary treatments can be low risk, low cost and essential to successful disease management – as well as posing potential risks.

#### **5. Is the current regulation (i.e. the Board's Good medical practice) of medical practitioners who provide complementary and unconventional medicine and emerging treatments (option one) adequate to address the issues identified and protect patients?**

Its possible that existing regulation is already deterring the application of appropriate low risk and beneficial treatments unduly, in the case of Hashimoto's.

It is currently difficult for patients to access many of the beneficial interventions for Hashimoto's (listed above against question 2.

I encourage regulations that support informed patient decision making.

#### **6. Would guidelines for medical practitioners, issued by the Medical Board (option two) address the issues identified in this area of medicine?**

I support some points in the guidelines.

I broadly agree with the objectives of the guidelines as stated:

- would not reduce consumer choice
- would not restrict medical practitioners' practice
- would not result in significant cost increases for consumers or medical practitioners
- would not restrict existing, accepted practice that may fall within the definition of complementary and unconventional medicine and emerging treatments
- would not stifle innovation or clinical research and trials.

However, we feel that some of the guidelines in the draft have the potential to contradict these objectives.

Specifically I am concerned that clauses such as 2.2, 2.4, 5.1, 5.2, 5.5, 6.1-6.3, and 9.1-9.2, could deter practitioners from recommending the complementary interventions that can be so useful for managing our disease.

Despite the low and/or manageable risks of complementary treatments for Hashimoto's, it is already hard to find medical practitioners who are willing to recommend them. I am concerned that the guidelines listed will further deter GPs and other practitioners in considering these avenues.

**7. The Board seeks feedback on the draft guidelines (option two) – are there elements of the draft guidelines that should be amended? Is there additional guidance that should be included?**

I am concerned that clauses such as 2.2, 2.4, 5.1, 5.2, 5.5, 6.1-6.3, and 9.1-9.2, could deter practitioners from recommending the complementary interventions that can be useful for managing our disease.

I would be concerned with any similar regulations that might serve to increase the professional risk, real or perceived, for doctors willing to recommend complementary treatments.

I do not object to the focus on informed consent outlined in Clauses 1.1 – 1.6, and 4.1 – 4.5.

**8. Are there other options for addressing the concerns that the Board has not identified?**

**11. Which option do you think best addresses the issues identified in relation to medical practitioners who provide complementary and unconventional medicine and emerging treatments?**

☐ **Option one – Retain the status quo of providing general guidance about the Board's expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board's approved code of conduct.**

☐ **Option 2 - Strengthen current guidance for medical practitioners who provide complementary and unconventional medicine and emerging treatments through practice-specific guidelines that clearly articulate the Board's expectations of all medical practitioners and supplement the Board's Good medical practice: A code of conduct for doctors in Australia.**

☐ Other – please specify.

Option 1.

I also urge for reforms to current practice, that improve and increase the access of Hashimoto's patients to the complementary treatments described here, such as T3 and NDT prescription, LDN, diet and supplementation.

## Public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments

Submission dated 28/06/2019

Submitted By: [REDACTED]

Age: 45 yo

State Residing In: NSW

To the Executive Medical Officer (Medical Board of Australia),

I am writing to state my interest and concern with the regulating of complementary and unconventional medicine and emerging treatments. My teenage son is currently seeing practitioners who practice functional and integrative medicine to treat his chronic illness (which is Chronic Fatigue Syndrome with underlying cause due to infections) and we are so grateful to have this available at the moment. Our previous general practitioner and conventional medical specialists, whom we were initially referred to see by her, could not give us any firm diagnosis. We were not given any diagnosis and no clear treatment protocols. Basically, my son was put into the 'Not sure' basket and just referred on to psychology treatment to prevent potential mental health issues due to his illness.

After 2-3 months of ongoing illness and his symptoms worsening because we were not given much in terms of treatment protocols or diagnosis, we were fortunate enough to come across a naturopath and general practitioner who practices complementary and integrative medicine. I am happy with our new practitioners so far as we have seen some improvements in my son's health. My son is not back to full health still, he still has a long way to go, but we understand it will be a long process, hence being chronic. Our naturopath and doctor provide us options with treatments and discusses their merits and potential problems. We feel we can trust their advice and that they have our son's best interest.

Sadly, not many doctors understand or treat chronic conditions like chronic fatigue syndrome. Hence there are not many doctors that deal with our son's condition which is a real tragedy and can leave many people like my son untreated, suffering and neglected. I strongly value free choice and if the Medical Board of Australia change the current regulations of medical practitioners who provide complementary, unconventional or integrative medicine and emerging treatments, then **many, many, many** chronically ill people will be severely affected, and I fear, will not be able to seek treatment for their condition. One being my teenage son.

When we are in a country like Australia where sound, science-based medical options are available, then this should be made readily available as an option for people who choose to go down this path of complementary and unconventional medicine and emerging treatments.

As the Medical Board of Australia, who seeks people's best health outcomes, I am strongly pleading that you choose **Option 1** and retain the status quo of providing general guidance about the Board's expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board's approved code of conduct.

If the Medical Board eventually decides to choose Option 2, for greater regulation, that it be modified from the current proposal, to ensure

1. That it applies to ALL medical practitioners with the same onus of exhaustive exposition of all treatment options, research etc, and
2. That the Board accept that Integrative Medicine, utilising Complementary or Unconventional or Emerging Medicine as well as conventional medicine, be recognised as a speciality, in order to allow increased Medicare rebates to help cover the increased costs of fulfilling the new regulations.

Thank you for your consideration,

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Friday, 15 March 2019 5:09 PM  
**To:** medboardconsultation  
**Subject:** 'Consultation on complementary and unconventional medicine and emerging treatments

Consultation on complementary and unconventional medicine and emerging treatments.

To whom it may concern,

My name is [REDACTED] and I have hypothyroidism. I was prescribed synthetic regulated Thyroxine ( T4 only) medication to keep my hypothyroidism/Hashimoto's disease under control.

It nearly ended my life!!!!!!

I had severe depression, brain fog, I gained 14 kilos, I had severe Fibromyalgia, I went into early menopause due to my irregular hormones, my liver enzymes and Reverse T3 was through the roof (3 times the level it should be and I do not drink or smoke). I had severe allergies as well.

Fast forward a few years of being so sick I wanted to end my life, not good for a mother and a wife but had the chance to try Natural Dessicated Thyroid (T3 and T4 combination ) within a matter of weeks all my sickness and symptoms started to dissappear. I have lost 12 kilos and for the first time in 17 years I was starting to feel normal. I have returned to work and can function in a normal life.

In my condition a one size fits all pill is not the solution and I urge and plead that if you take T3/T4 combo / Natural dessicated thyroid away from legally being prescribed and made by a compounding chemist you need to find an alternative as it will be detrimental to not only myself but many others with my condition.

I urge you to take notice on behalf of those of us who suffer. Treat the symptoms not the numbers and stop lining the pharmaceutical company pockets and shareholders.

I welcome any discussion should the opportunity arise.

Kind regards,

[REDACTED]  
[REDACTED]  
[REDACTED]

The Executive Officer  
Medical  
AHPRA  
GPO Box 9958  
Melbourne VIC 3001  
medboardconsultation@ahpra.gov.au

RE: PUBLIC CONSULTATION ON COMPLIMENTARY MEDICINE AND EMERGING TREATMENTS

To whom it may concern

I am extremely concerned about the proposed changes to the guidelines surrounding medical practitioners who provide complementary and unconventional medicine in Australia, as I do not agree with the proposed changes, and wish to put forward my preference for Option 1 as outlined in the Public Consultation Paper.

My daughter has used Complementary, Unconventional and Emerging Medicine and she highly value its availability and is very happy with its practice. Her treating doctor already provides discussion about options for treatment and their relative merits and potential problems, and she values free choice in making decisions regarding her own personal medical treatment. I place considerable importance on having the freedom to choose the medical care that I use to treat my health issues, and the ability of practitioners to provide it by way of conventional, complimentary and emerging medicines

It is clear from my daughter's treatment, that the combined allopathic/complementary treatment protocols work for her chronic illness. It is an attack on our human rights by the Australian Medical Board's antiquated ideology, and that my future health and my children's future health are placed in jeopardy because of this suggested change in the guidelines. I want to be able to have the choice to be effectively treated by my doctor in Australia using conventional, complementary and emerging medicine. I do not want to be placed at risk of complications by having to access this treatment overseas.

Imposing an increase in restrictions through changes in the guidelines will stifle innovation and advancement of medical treatment options available in Australia for chronic and disabling illness. These proposed changes will cause unnecessary suffering and increased cost to the many thousands of patients. As such, my preferred choice of the proposed outcomes is Option 1 (retain the status quo), as laid out in your Public Consultation document.

If the Medical Board eventually decides to choose Option 2, with greater regulation, I ask that it applies to ALL medical practitioners, with the same onus of exhaustive exposition of all treatment options, research, and that the Board accept that Integrative Medicine, utilizing Complementary or Unconventional or Emerging Medicines as well as conventional medicine, be recognized as a Specialty, in order to allow increased Medicare rebates to help cover the increased costs of fulfilling the new regulations.

Your sincerely



01/04/2019

## Consultation on complementary and unconventional medicine and emerging treatments.

The feedback that I am giving is based on what I have personally experienced and observed. I am a woman of 72 years of age, lived in four states of Australia and been to medical practitioners in many different places during my lifetime. Medically I have had some acute and some chronic health issues, some as a result of having been exposed to a variety of chemicals and heavy metals in a work environment.

Some of the issues that you invite feedback on such as safeguards, inappropriate prescribing, feeling vulnerable, adverse side effects, the health & risk profile of the patient not being taken into account, known risks not fully disclosed, false claims of benefit, unsupported claims of efficacy and safety. I have personally experienced all of these issues and on all occasions with Conventional Medical Practitioners, mostly General Practitioners but in two instances with specialists.

With General Practitioners who practise Integrative Medicine I have been listened to and heard, options have been put to me for discussion and decision making. Sometimes I have chosen time, to ponder on the information that has been given to me & enable me to do my own research & then return in a better position to make my own decision and take responsibility for it.

The choice for me to go to a G.P. who practices Integrative Medicine means longer travelling and is sometimes more costly. It has also meant greater beneficial results, the opportunity to be an active participant and informed decision maker in my health regime and to date I have not experienced adverse side effects.

I would prefer that you retain option 1.

If you want to strengthen any current guidance then please strengthen it for all Medical Practitioners. I am sure that my experiences are not isolated and that many other people are choosing Integrative Medical Practitioners for the same overall reasons as myself, that is, that Conventional Medical Practitioners are not meeting our medical needs.

[REDACTED]



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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 8:12 AM  
**To:** medboardconsultation  
**Subject:** 'Public consultation on complementary and unconventional medicine and emerging treatments'

Dear MBA

I am writing in support of Option 1 in your current review of integrative medicine guidelines.

I strongly believe that Option 2 would be an unwise decision that could retard medical advances that are desperately needed to deal with existing and emerging illnesses that current medical practices and protocols cannot adequately diagnose, treat or cure.

My early working career in medical research in the 1970s taught me how much we don't know about the causes and treatments of diseases of the human body. No matter how much we cram into a doctor's extensive medicine studies, there is still, even today, much to learn.

Several illnesses have left me with no definitive diagnosis or viable treatments under Western medicine. My biochemistry training enabled me to research traditional treatments that worked, most with several thousand years of "evidence" base, rather than just go away and die.

### **1. & 2. Definitions**

No, I do not agree with the proposed terms: "complementary and unconventional medicine".

### ***Traditional Medicine***

Hippocrates: First, do no harm.

Western medicine grew from Egyptian, Greek, Roman and Middle Eastern sources from 2000 or more years ago. Even fifty years ago, 70% of pharmaceutical medicines were sourced from these traditional herbal medicines, as listed in Culpeper's *Compleat Herbal* published in 1653.

Most of these traditional medicines have an "evidence base" of several thousand years whereas many patented synthetic pharmaceutical drugs developed since the 1970s have significantly increased the incidence and severity of adverse drug reactions. That is, most modern pharmaceuticals are NOT "conventional", but too often experimental with an extremely short "evidence" base. It is in fact pharmaceuticals that are "unconventional" medicine.

"One hundred years ago, in 1908, health care was virtually unregulated ... Medical science and technology were primitive, and there was little that physicians could do to treat most illnesses. It had been only 40-50 years since the first understanding of bacteriology, antisepsis, and immunology; 21 years since the invention of a blood pressure measurement device; and 13 years since the discovery of X-ray technology. It would not be until 1910 that the first drug treatment to destroy disease—and not the patient—would emerge or that surgery would become common for conditions like tumors, infected tonsils, and appendicitis."

George B. Moseley III, JD, MBA, *The U.S. Health Care Non-System, 1908-2008*,  
<https://journalofethics.ama-assn.org/article/us-health-care-non-system-1908-2008/2008-05>.

Yes, some new pharmaceutical medicines are absolutely life-saving but they are not "conventional" in the timeframes that traditional medicines have enabled humanity to thrive for thousands of years before pharmaceutical medicine arose. Given that the approval processes for modern pharmaceuticals are too often based on small secretive (therefore unreviewable) trials, primarily on men in their prime, there is a great deal of room for more scientific rigour in their development and long term testing. Current adverse drug reaction registers are poorly maintained and pharmaceutical approvals are too rarely reviewed in light of these reactions.

The terms "traditional" and "Western" medicine are more accurate descriptions.

### ***Emerging medicines***

Other cultural traditions offer “emerging” medicines for the Western pharmacopaedia. Many of these medicines also have a long traditional evidence base and have potential to help people recover and stay well. (Chinese medicine is one example.)

### **3 and 4. Issues in relation to integrative medical practises**

Given that there are few serious complaints about the practices of integrative medicine practitioners, compared to the number of recorded adverse drug reactions for prescribed pharmaceuticals, perhaps a more rigorous review of pharmaceuticals is in order?

Perhaps you could look into why so many Australians are turning to traditional and emerging medicines to prevent or treat a wide range of conditions that may or may not be treatable by pharmaceutical medicines? For example, the fact that the costs of some cancer treatments and legal CBD oil for epilepsy far outweigh the illegal alternatives.

There are some real issues. Many folk use Dr Google as a diagnostician and self-medicate with traditional and emerging medicines. Again, one might ask why and find that a shortage of bulk-billing doctors and other accessibility issues (including too short consultation times) may discourage some patients from accessing Western medical advice and treatment, especially for chronic and obscure symptoms (see also Emerging Illnesses below).

There are already effective regulations for the apothecaries and makers of prepared herbal medicines, including TGA approval and other measures to ensure that the herbs are properly prepared and not contaminated with dangerous substances. As with pharmaceuticals, there are always risks of allergy, sensitivity or unknown interactions.

#### ***Other Areas of Practice and Safeguards Against Unscrupulous Practices***

I have no experience of, or interest in, stem cell therapies, PRP, or anti-ageing treatments. As many of these practices are highly profitable, there may be a case for specific guidelines to cover excessive claims of therapeutic benefits and appropriate processes to deal with patient complaints, especially for cosmetic surgical procedures.

There are unscrupulous operators in every field of endeavour, medicine included. Current feedback and complaint mechanisms could be improved but not limited to integrative medical practices. Conventional doctors are also sometimes somewhat less than professional. I have certainly experienced quite a few instances of poor patient management from doctors and hospitals, some occasioning grievous bodily harm. Complaints systems are difficult to navigate without a supportive GP. When the GP (or hospital) is the problem, it is virtually impossible.

#### ***Research and Safeguards in the use of Traditional and Emerging Medicines (5. & 6.)***

The astonishing progress of proper white coat laboratory research into traditional herbs and remedies and more recently “discovered” indigenous medicines over the past thirty years is yielding promising results across all fields of prevention and treatment for disease, degeneration and distress reduction. This research also identifies critical information such as dose-response curves and toxicology for these medicines.

Some traditional medicines are “mostly harmless” substances found in foods that have mild to moderate health benefits and few harmful effects, even if taken in concentrated forms.

Many “conventional” GPs still recommend some of these traditional remedies for minor ills: lemon and honey and ginger drinks for sore throats, Vicks or eucalyptus oil decongestants, clove oil for sore teeth, eggs to bind loose bowels and barley water for colic, for example.

Other traditional and emerging medicines are stronger and some of these can be dangerous if not taken in moderation and with due consideration of drug interactions and contraindicating conditions. Both naturopaths and medical practitioners need to be aware of these limitations.

The Mayo Clinic web database for contraindications and known interactions of pharmaceutical and traditional medicines is excellent for reducing complications from combining prescribed and traditional medicines. Some traditional medicines even enhance the efficacy of pharmaceutical medicines. If anything, such authoritative resources should be expanded to include more emerging medicines. Same with MIMS, which is no longer available to the public. Information on side effects, contraindications and drug interactions provided by pharmaceutical companies is generally quite poor, compared to WEBMD or Mayo Clinic listings. Some chemists have excellent knowledge of drug interactions, but many doctors do not.

Integrative doctors with the knowledge base to recommend and prescribe traditional medicines (concomitant with, or instead of, “conventional” pharmaceuticals) are more highly trained than most naturopaths. Limiting integrative medicine practices by doctors sends patients back to naturopaths, not all of whom are sufficiently knowledgeable, even if some are excellent. Good naturopaths do extensive consultations with their patients, but they do not have access to the range of diagnostic tools that doctors have at their disposal. At a minimum, they provide time and attention and give patients a sense of agency to do something to improve their health.

Integrative doctors and naturopaths are most valuable when Western medicine has diagnosed a problem but has little or nothing to offer by way of treatment. Some are successful in treating tick borne diseases, environmental mould illnesses and so called chronic fatigue, and their prescriptions in these cases may warrant further study. Good integrative doctors are discovering ways of dealing with such recalcitrant illnesses but cannot do so if limited to “conventional” pharmaceutical prescriptions in ten minute consultations.

So, in the context of this public consultation, one must ask: has this review of integrative medicine practices arisen because the unconventional synthetic pharmaceutical industry feels threatened by the increasing popularity of traditional and emerging medicines among patients?

Does the popularity of traditional medicines demonstrate failures in current medical treatment protocols? Is this inquiry revisiting the American Medical Association’s Flexnor Report (1908)? As The Medical Board of Australia, are you serving the health of Australian patients or the wishes of the pharmaceutical industry by supporting option 2?

### **Other Therapies**

Some alternative therapies such as chiropractic, acupuncture and Chinese medicine, are already well-regulated, and naturopaths undergo extensive education and training. Therapies such as Reiki and remedial massage also require training and some professional oversight.

Unconventional diagnostic testing is potentially problematic, mostly due to lack of oversight and regulation. Conversely, it is not easy to get tested for excessive pesticide exposure or chronic heavy metal poisoning through subsidised pathology testing, making proper diagnosis prohibitively expensive for poorer patients. Mercury poisoning from decaying dental amalgams is a real problem, especially for those who cannot afford regular dental treatment. The various chelation therapies are expensive and, in some cases, dangerous. “Conventional” doctors usually misdiagnose the symptoms as mental illness which is equally dangerous.

Then there are disputed testing protocols. For example, there are no agreed “best practice” tests for many chronic “Lyme-like” tick borne diseases. Even some definitive antibody tests for tick borne microbes known to be found in Australia only indicate past exposure, rather than present infection. More research is needed to develop better testing protocols.

### **Emerging Illnesses**

Australia has a tick problem. We have not done enough research to identify the full range of pathogens that can be transmitted by tick bites in Australia, even discounting the possibility of Lyme disease. We may even have pathogens that are worse than Lyme’s. We don’t know.

For example, recent research suggests that mycoplasma infection is a widespread secondary tick infection that is also sexually transmissible and may be developing immunity to the heavy-duty antibiotics that current protocols prescribe, even if diagnosis is successful.

Australia has mosquito problems as well. Yes we can test for dengue, MVE, Barmah and Ross River, but some folk don’t recover as well as others and there may be more viruses out there without names ... yet.

Australia also has an environmental mould problem, especially since most of us live on the coastal fringes with moist air and poorly designed and ventilated home and work places. Regions with high environmental fungal populations have a higher incidence of asthma and chronic sinusitis. We are fortunate to have few cases of acute aspergillosis.

All of these aetiologies may contribute to so-called “chronic fatigue syndrome” and similar prolonged chronic debility.

Make no mistake: these people are sick. Symptoms and pathology agree that they are fighting something – we just don’t know quite what. Patients are clearly unwell yet conventional blood work reveals little more than various antibodies, neutrophil spikes and elevated ESRs.

The recent Federal Government Inquiry into Tick-borne Diseases highlighted the lack of research into possible treatment protocols, even if only by collating a few hundred case studies put together by

integrative medical practitioners. Any treatment option for these chronic conditions is by definition “unconventional”. We don’t have any “conventional” protocols!

The long term answer to these conditions is research: identifying pathogens and treatments.

In the meantime, patients turn to traditional medicines to seek some relief and well-being.

If nothing else, integrative medical practitioners are able to monitor the efficacy of traditional medicines in the progress (or otherwise) of these chronically debilitated patients.

My recovery from several identified tick-borne pathogens and a “chronic fatigue” profile was aided by an excellent integrative GP. I researched herbs, dietary and hormone supplements that might alleviate the recurrent fevers and actual measured deficiencies (thiamine, pyridoxine, B12, ferritin, zinc, magnesium, testosterone) and we devised an affordable supplement plan that remedied many symptoms. Finding the right herbs to deal with the underlying chronic infections took longer, especially the toxoplasmosis and mycoplasma.

I chose to pulse dose several antibiotic herbal tinctures in rotation (olive leaf extract, thyme, oregano, calendula, and quinine were best for my cocktail of bugs) along with immune support, rectifying dietary deficiencies and exercise over many months. In contrast, my journey through post-operative MRSA involved several ineffective antibiotics, except for the nasty side effects (lost 5 kg to tetracycline), and resorting to herbs and honey, which worked. My improving health enabled my doctor to provide useful suggestions to other patients with similar problems.

At the time I was a student on a no fad, no bullshit budget and so I avoided all the expensive health food shop supplements, naturopaths and costly self-proclaimed “experts”. My university also enabled access to medical journals and other peer-reviewed scientific research. I watched other unwell folk spend small fortunes on various quackery with little success. I am grateful that I had some basic biochemical and medical knowledge and access to resources. My doctor’s support of my endeavours was an important factor in my recovery.

I suspect that long-term antibiotics in the absence of identified pathogens in patients who are ill from unknown aetiologies may be problematic in some cases, BUT we don’t have identifying pathology tests for some of these bugs. If antibiotics provide people with relief, then that is a good outcome and may be useful for other patients with similar conditions. If it does not, then other treatment options must be explored, including traditional and emerging medicines.

Although it is true that some “integrative” medical practitioners are “cashing in” on these illnesses, it is also true that many of those who can afford their treatments get better.

Other doctors are simply trying to help folk feel, if not become, well. Their knowledge and expertise should be applauded, if not rewarded, rather than punished.

### ***Medicinal Cannabis***

The accessibility and costs of lawful medicinal cannabis for patients must be improved. Too many folk suffer unnecessarily from the delays and prohibitive expense of the current prescription scheme. THC-free CBD oil is neither psycho-active nor highly toxic. Yes, it can lower blood pressure, but so does aspirin which we can buy in supermarkets. Once there is sufficient clinical evidence of both safety and efficacy, CBD oil should be more freely available, either listed on the PBS or without prescription.

### **General Observations regarding Option 1 versus Option 2**

Doctors cannot do much in a conventional ten minute consultation. They can identify symptoms and write a medical certificate, a prescription or order tests in that time frame, but little else. For most consultations for simple health problems, that is sufficient.

For anything more complex, longer consultations are an absolute necessity to avoid repeat or emergency patient presentations and adverse drug reactions due to failing to examine the whole patient, all relevant history and developing an integrated treatment plan.

#### ***Example: Contraindications***

Many conventional doctors do not take contraindications seriously enough. For example, cortisone is a standard asthma medication to reduce inflammation but it also suppresses immune responses. When the asthma is triggered by environmental moulds, the treatment may ease symptoms in the short term but then they worsen as the mould (and any retrovirus or latent toxoplasmosis or mycoplasma) proliferates. The patient gets sicker. Cortisone is contraindicated for people with toxoplasmosis. A ten minute consultation will not reveal the cause of the symptom or any contraindications for the standard treatments. At best, this results in multiple consultations, at worst, hospital admission and death. Identifying and treating the asthma trigger rather than suppressing the symptom is far more effective. In acute situations, there are other anti-inflammatory drugs that do not exacerbate underlying chronic infections.

#### ***Example: Chronic Pain Management***

It was recently discovered that the standard tests for the efficacy of pain medications was testing the wrong kind of pain. (Identifying the pathways required for coping behaviours associated with sustained pain, [Tianwen Huang](#), [Shing-Hong Lin](#), [Nathalie M. Malewicz](#), [Yan Zhang](#), [Ying Zhang](#), [Martyn Goulding](#), [Robert H. LaMotte](#) & [Qiufu Ma](#), *Nature*, volume 565, pages 86–90 (2019))

The entire basis of pharmaceutical chronic deep pain management must now be reconsidered. Meanwhile, many people self-medicate with alcohol, cannabis and other non-pharmaceuticals or face the perils of opiate addiction (prescribed or not prescribed).

Option 2 does nothing to mitigate the opiate crisis. It just prescribes more inappropriate pain meds in the allowed 10 minute consultation. Option 1 allows integrative medicine practitioners to explore and develop deeper solutions to chronic pain management. Therapies such as massage, chiropractic, or Bowen therapy can alleviate or reduce some kinds of chronic pain. Some pain can only be remediated by medications, although topical applications may be appropriate in some cases (see for example: Control of pain with topical plant medicines, James David Adams Jr.\*, Xiaogang Wang *University of Southern California, School of Pharmacy, Los Angeles, CA, USA Asian Pac J Trop Biomed* 2015; 5(4): 268-273).

### **Regional Issues**

Living in regional Australia, I also note that many people must travel some distance to see a doctor (involving more time and expense than for city folk), and often have a list of several health matters to discuss with their doctor. In times of drought and hardship, this may include psychological stress and mental health issues. Longer consultations and integrative approaches are needed to assess and treat rural patients with limited access to other health services.

### **Summary and Recommendations**

In my experience and view Option 1 to retain existing arrangements for integrative medical practitioners is the only logical option of the two choices presented.

I would even suggest an Option 3, that there be more collaborative research with integrative medical practitioners and traditional and alternative health practitioners to expand the range of therapeutic options available to maximise our health, especially in the face of emerging illnesses such as “chronic fatigue”, tick borne diseases, MRSA from hospital surgery, the new threat of *candida auris*, chronic cumulative heavy metal poisoning, environmental moulds, the resurgence of drug-resistant tuberculosis, even the next mutant flu epidemic ... none of these can be effectively identified and treated under the current conventions of Western medicine.

Yet manuka honey works on MRSA, olive leaf extract is effective on many (but not all) drug-resistant bacteria, viruses and moulds. Beta-caryophyllene shows promising results for a wide range of microbes as well as pain management. Cannabinoids can be effective for epilepsy and pain management, and may also treat some cancers. At the very least, CBD oil reduces the nauseating effects of chemotherapy. Ayurvedic oil pulling with essential oils (clove, thyme, oregano) can dramatically improve oral health, even dissipating tooth abscesses more rapidly than oral antibiotics (without the nasty side effects of the antibiotics).

A broader range of therapeutic treatments will enable medical practitioners to help more patients, rather than face the depressing helplessness of watching patients suffer from illnesses that have no “conventional” treatment.

Greater support for research by case study is warranted to identify traditional and emerging medicines which offer promise for more formal drug trials.

The pharmaceutical industry also has a valuable role to play in expanding the range of standardised (even if not proprietary) emerging and traditional medicines that will be needed to respond to new and drug-resistant illnesses.

[REDACTED]  
Social Ecologist  
[REDACTED]

30 June 2019

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**From:** [REDACTED]  
**Sent:** Friday, 14 June 2019 4:21 PM  
**To:** medboardconsultation  
**Subject:** Brain Cancer patient's perspective on complementary therapies

I am a 48 year old Brain Cancer patient. I find complimentary therapies such as yoga, meditation and massage assist greatly with my physical and mental health. Please encourage GP's to complement their mainstream treatments with these low cost, safe and effective complementary therapies.

Regards

[REDACTED] (Alice Springs)

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**From:** [REDACTED]  
**Sent:** Thursday, 2 May 2019 2:43 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional

Hello

I am submitting a response primarily in response to:

**3. Do you agree with the nature and extent of the issues identified in relation to medical practitioners who provide 'complementary and unconventional medicine and emerging treatments'?**

**and**

**4. Are there other concerns with the practice of 'complementary and unconventional medicine and emerging treatments' by medical practitioners that the Board has not identified?**

I am writing to express my concerns about the potential restriction of integrative doctors. I am a huge advocate for integrative medicine as it has been the only thing that helped me through significant personal health problems. I am also concerned about the increasing suppression of complimentary and alternative therapies in this country, as evidenced in particular by the removal of these treatments from extras cover by health funds.

In my personal circumstances, I have spent many years struggling to get results when following the prescriptions of my conventional doctors. It was only when I started seeing an integrative doctor, and at times a naturopath, that I started to see significant improvement in my health, and was able to return to a productive and happy life.

I suffer Hashimoto's Hypothyroidism, and while this is a very common condition, I have found it remarkably difficult to get treatment that allowed me to live a high quality of life through the conventional medical system. I have seen specialists, and they did nothing more for me than double check my T4 prescription and charge me a very pretty penny for the privilege. My experiences have led me to lose faith in the effectiveness of seeing these professionals.

In seeing an integrative doctor, I had extensive bloodwork done, and as a result was advised to make dietary changes, take assorted vitamins and was also prescribed T3 supplements, which do need to be compounded. While I have read numerous articles claiming that T3 supplementation should not be necessary in treating hypothyroidism and that T4 supplementation should be sufficient, my personal experience has been that I experienced a notable upsurge in energy and vitality once I started taking the T3 as well. Integrative practitioners also offer much better monitoring and support over time to not only get you well, but keep you healthy.

While I recognise that there are probably some practitioners who do not hold themselves to high professional standards, and that there are cases that justify the review of the provision of such services, I have concerns that the regulations imposed will become draconian, harsh and unfairly prejudiced against any modality that falls outside the conventional medical sphere.

My own experience has been that doctors promoting themselves as integrative are generally more thorough than regular doctors, and in fact **my worst** experiences in health care have been with conventional doctors. After all, it was only after several years of frustration and declining health under the supervision of regular doctors that I started to seek out integrative ones. While integrative doctors often charge more, this allows them to take the time to really get to know you, treat you like an individual instead of a number, and take a holistic view of your life and health instead of scribbling out a prescription and saying "next." I have seen dozens of alternative providers, and while some have been less experienced than I would prefer, I have yet to see anyone who is indifferent, unprofessional, or offers anything less than a high level of integrity and care. I have seen numerous mainstream doctors who are indifferent, uncaring and condescending.

I think any investigation would find that many people who do seek out complimentary or alternative therapies do so when the standard medical system has failed to get them the results that they need. Unless a conventional doctor can find a diagnosis, they are often unable to offer any help. While this makes practical sense, it is little comfort for someone suffering debilitating symptoms, such as patients who may believe they have Lyme's disease for lack of an alternative diagnosis. This is often where people will seek out alternative or complimentary therapies in their desperation to get a result. As the paper observes, this can lead them vulnerable to manipulation however suppressing their ability to find an alternative is not the solution, and is only more likely to drive them to illegal or questionable methods. I believe greater levels of information, transparency and accreditation for practitioners would be a better solution. Perhaps an Alternative Therapies board, governed by alternative and complimentary practitioners, would be better than mainstream medical practitioners working to regulate something they frankly often disparage.

Another issue that I see is that conventional medicine is primarily concerned with treating symptoms and dealing with illness rather than keeping people well in the first place. Alternative and complimentary medicines are often focused on maintaining wellness, and can be of use when someone is not sick enough to justify a prescription or require surgery. There have been times when I just wasn't feeling entirely well for an extended period. I went to my doctor, got tested for many things and the doctor came up with nothing and sent me on my way saying they couldn't find anything wrong with me. I then went to see a naturopath, who would usually support me to focus on being healthy, eliminating toxins and taking various supplements for a period, after which I have always felt significantly better. If I had only listened to my doctor, I may have continued to spiral downhill until I was quite unwell. I may not have had an actual illness, but my immune system was clearly compromised, and if I'd continued in this way, it would only be a matter of time before I contracted something more serious.

It is my view that if more people take action when they first start to feel unwell, then they are less likely to develop serious conditions which will then place a much greater strain on the healthcare system. I believe this is the role that complimentary therapies can hold. Patients that end up hospitalised with serious conditions did not get that way overnight, and if there was more of a focus on early intervention, lifestyle and dietary choices and preventative measures, our medical system would be under much less pressure.

I also had the experience of working in practice management in the chiropractic industry for several years. I do not make any claim to particular expertise, however having witnessed hundreds of patients and having heard their stories and reasons for seeking treatments, I can say I saw many patients be effectively treated quite quickly for pain they had sometimes been suffering for many years, sometimes to the extent of being unable to work or even walk. I also saw some patients who did not experience relief, and had better results once they switched to seeing a physiotherapist or sought different treatment. It was upsetting to see so many people who could have saved themselves several years of pain if they had come to see a chiro sooner. Most of these people said something along the lines of being told not to by their doctor, or generally believing that chiropractic was not a reputable therapy. Eventually, when every other avenue was exhausted, in desperation, they would come, and finally receive relief. The paper lists concerns that seeking alternative treatments may delay the patient from seeking mainstream medical treatments and delay their treatment, but in my observation this also works the other way around, and can prevent patients from receiving help in the early phases of their condition.

My observation is that there is an unnecessarily harsh dividing line between conventional ("reputable") medicine and alternative/complimentary ("disreputable") medicine, or therapies. I understand that there is a necessity of evidence based practice, and that the scientific method is an essential component of developing effective methodologies. However, commonplace surgeries are often not held to this standard, and yet are regularly prescribed and encouraged by standard medical procedure. It is my view that if the mainstream and alternative practitioners were more able to collaborate and cooperate, there would be better outcomes. Patients often feel they have to "pick a side," rather than using the best modality for the complaint. I know many people who have come to have a strong scepticism towards conventional medicine, believing the field to be in the pocket of pharmaceutical companies. I have heard many people suggest that the increasing supervision of alternative therapies is motivated by an unwillingness to share the profit rather than from legitimate concerns about efficacy. While some people can get rather extreme, and I don't subscribe to the belief that conventional medicine is without merit, I similarly do not believe that alternative and complimentary therapies are full of quacks and charlatans. There are issues that arise through the absence of cooperation.



For example, when I've had issues and I'm not making headway with a doctor, and I've gone to see a naturopath, the naturopath wants to use blood tests to confirm the correct treatment. Unable to order pathology themselves, they sent me back to a doctor, who declined to order the blood tests requested, or would only approve some of them. This becomes incredibly frustrating, as a patient, and it starts to feel like it's impossible to get results, and in the meantime my health can be declining, or persisting in being compromised.

I also observe that what is accepted asmissible evidence for the advocacy of a modality varies greatly between countries based on the kind of standards that are held as being necessary. If we require that all methodologies require a double blind, placebo controlled test in order to be considered as evidence based practice, we are potentially cutting ourselves off from effective and much needed methodologies. Not all treatments lend themselves to such testing. How do you give someone a 'fake' massage? Even if you don't use specific techniques, the patient is still going to receive the experience of lying down and receiving touch. Similarly, I imagine it is difficult if not impossible to give a placebo chiropractic adjustment. This doesn't mean the modality doesn't offer any benefits, it means that this method of evidence collection is not suitable for this treatment, in the same way that few people will sign up to be cut open for a placebo controlled surgery trial.

I have no problem with guidelines that support practitioners to maintain a consistent level of professionalism. However I am concerned that any guidelines will become increasingly difficult to comply with for the standard practitioner and will result in a drop in the number of practicing therapists of various modalities. I think it important that discussion and dialogue be opened up rather than shut down. I see a huge amount of potential for collaboration and mutual support, and wish that there could be a higher level of cooperation between fields. In my conversations with many practitioners, I observe that alternative and complimentary practitioners in this country are starting to feel persecuted and marginalised rather than regulated and supported to maintain high standards. While there are no doubt some disreputable people that need to be sanctioned, there is a difference between supporting standards and punishing the majority for the ill conduct of the few.

Regards,

[Redacted]

[Redacted]

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**From:** [REDACTED]  
**Sent:** Monday, 22 April 2019 7:29 PM  
**To:** medboardconsultation  
**Subject:** Re: Consultation on contemporary and unconventional medicine and emerging treatments

> On 21 Apr 2019, at 10:04 am, Consultation on contemporary and unconventional medicine and emerging treatments <medboardconsultation@ahpra.gov.au> wrote:

>  
> From: [REDACTED]  
>  
>  
> Message Body:  
> My family is suffering from some conditions that can only be treated with natural products.  
> I also have a condition called Pyrole.  
>  
> My body needed some minerals and vitamins. My integrative doctor diagnosed this through tests.  
> These tests are not available through general GP.  
>  
> Lett us make sure our doctor and healthcare practitioners are allowed to heal people in this way.  
>  
> The Pharmaceutical Drugs may help short term but long term they are often causing toxicity in the body.  
> We need to care for people in the best way we know how.  
>  
> Life is worth more than profits to a few.  
>  
> People should be allowed TO GET HEALTHY!  
> There is too much suffering and even death caused by GREED.  
>  
> Please be honest and do the right thing..  
>  
> Kind regards,  
> [REDACTED]  
>  
> .  
>  
>  
> File Attached:  
>  
> --  
> This e-mail was sent from (<http://integrativemedicinefreedomofchoice.com>)  
>  
> [REDACTED]  
>

To whom it may concern,

I am writing to express my concern about the proposal to strengthen guidance for medical practitioners who practice complementary or unconventional medicine and emerging treatments. In my view, the existing guidance is effective and appropriate (Option 1).

I have had myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) for 11 years. ME/CFS is, unfortunately, a condition that is poorly understood, and carries many misconceptions. During that time I have seen many doctors of varying types - from straight-down-the line conventional, to more open-minded integrative and environmental medicine doctors, through to one who was pretty out there. None of the conventional doctors have been any help whatsoever. When confronted with something they don't understand, rather than admit their (understandable) ignorance and their inability to help, they have the unfortunate tendency to blame the patient, or to grasp at disproven psychosocial models of illness<sup>1</sup>. Integrative and environmental medicine doctors, on the other hand, have been much more supportive, showing a willingness to listen and delve into the intricacies of my illness.

My health has improved under the care of two integrative and environmental medicine doctors. Particular treatments I have benefited from are:

- \* regular zinc supplementation has reduced the frequency and length of viral infections (of which I was exceedingly prone, and unduly impacted)
- \* treatment for gut dysbiosis (based on the peer-reviewed research<sup>2</sup>). This has taken me from 30% functionality to 40%, which may not seem like a lot, but believe me, every little improvement is cherished.

I am currently trialling the (off-label) use of low-dose naltrexone (LDN), which in research has been shown to help fibromyalgia sufferers<sup>3</sup>. Research on ME/CFS is still coming, but I have a close friend (also with ME/CFS) who has improved markedly since beginning LDN. She has gone from being mostly housebound and barely able to socialise, to being able to tolerate large numbers of people with much less brain fog. Her quality of life has vastly improved.

The reality of having a disease such as ME/CFS is that I need to be deeply involved in understanding my illness and the latest research. To be honest, I know far more about the illness than the vast bulk of doctors, and my most effective management techniques (low-carb diet, pacing with a heart rate monitor) were discovered on my own, rather than suggested by any doctor. In order to access effective treatments, I need the freedom to approach practitioners who have different approaches and are willing to work with alternative and emerging treatments. There are doctors out there whose methods do not fit into my view of the world or my illness, but I am happy to judge them for myself. I don't need the medical board to do that vetting for me. By strengthening your regulations, you would be impinging on my freedom to find effective treatments. Indeed, if I can't find a doctor to support me in these treatments, I may be inclined to trial them without any professional support whatsoever. Pushing treatment underground would be folly.

If the proposed guidelines are adopted, they will have an outsized effect on people with poorly understood illnesses such as ME/CFS. These guidelines will increase the burden on less-conventional doctors, and may discourage them from practising. This may increase the cost of accessing those doctors, or drive patients to access them via less regulated professions (e.g. naturopaths) or even via underground means. Increased harm to patients is a likely result. Furthermore, new treatments are incorporated into conventional medicine via those practitioners

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1 <https://emerge.org.au/wp-content/uploads/2018/04/PEM-GET-Primer.pdf>

2 <https://translational-medicine.biomedcentral.com/articles/10.1186/s12967-018-1392-z>

3 <https://onlinelibrary.wiley.com/doi/full/10.1002/art.37734>

who are willing to take greater risks and trial new methods. By making it more difficult to do that, the ability for medicine to evolve and improve will be hampered.

Regards,

A black rectangular redaction box covering the signature area.

I am a 43 year old solicitor based in Sydney who is unable to work due to health issues.

I submit that the Board should implement Option 1, namely, retain the status quo.

I answer the Board's questions as follows:

1. NA – there should be no guidelines and term.
2. NA – there should be no definition.
3. No. See my submission below.
4. No.
5. No.
6. Yes. It appears the Board is unaware of the benefit of some complementary and unconventional medicine and emerging treatments.
7. Yes.
8. No, they are unnecessary and unfairly single out complementary medicine practitioners.
9. Yes. See my submission below.
10. No, the status quo ought to be retained.
11. Option 1.

#### **General comment**

The Board's approved code of conduct is sufficient. It is unfair and unnecessary for the Board to single out practitioners of complementary and unconventional medicine and emerging treatments. I use complementary and unconventional medicine and emerging treatments which provide me with crucial health interventions otherwise unobtainable and which provide me with enormous benefit in the baseline of my health. Without them I would be bed bound. I am concerned that the practice-specific guidelines proposed in Option 2 might deter practitioners from providing this medicine and treatments.

Consumers ought to have the right and opportunity to use health care of their choosing and practitioners ought to be free to so practice. It would be a denial of human rights to prevent ill persons from gaining access to health care of their choosing.

The regulation proposed by the Board is a value judgment about certain medicines and treatments. The Board sets out several concerns it has about complementary and unconventional medicine and emerging treatments such as concerns as to side effects and delayed access to more effective treatments. Yet conventional medicines and treatments give rise to the same concerns. Conventional medicines and treatments can have very harsh side effect and can negatively affect the course of one's illness. Yet the conventional medicines and treatments are monitored in the ordinary course of things without any special guidelines. And so it should be for complementary and unconventional medicine and emerging treatments.

I currently take off-label medication for my condition prescribed to me by a conventional medical practitioner (immunologist) which significantly helps my condition. The same arsenal of off-label prescriptions and other complementary, unconventional and emerging medicines and treatments should be available to complementary medicine practitioners.

I agree that some complementary and unconventional medicine and emerging treatments appear to have little or no effect (such as applied kinesiology and homeopathy). But you should not target all complementary and unconventional medicines and emerging treatments with the same brush. Many of these medicines and treatments are crucial health interventions and ought to be available to the public. As you yourselves have pointed out in the discussion paper, more than two-thirds of consumers report using complementary medicines. Many of the illnesses, medicines and treatments you have listed in your discussion paper as controversial are in fact beneficial and heavily relied upon by members of the community. You would be seriously, adversely affecting a great many people's health if the recommended guidelines were implemented and complementary practitioners were restricted from providing such interventions.

### **Issues and concerns about this area of practice**

I have seen numerous doctors and health professionals practising both conventional and complementary medicine and I have found no difference in the standards employed amongst them. Conventional medicine practitioners have been as (if not more) likely to prescribe harsh medical treatments with significant side effects for my conditions. When comparing the two, in general, I consider the complementary and unconventional medicine and emerging treatments I have been offered or taken to be safer than the conventional medicines and treatments which have been recommended to me by conventional medicine practitioners. The overwhelming majority of complementary medicine practitioners I have seen have been well qualified and experts in their field of practice.

I do not have an issue with complementary medicine practitioners prescribing medicines in which they have a commercial interest provided that they disclose that interest to the patients. Let's not forget that conventional medicine practitioners often have commercial interests in the medicines and treatments they recommend including pressure or encouragement from pharmaceutical companies to prescribe certain medicines.

In the discussion paper you state:

Many of these treatments are funded privately, can be expensive, and may have uncertain results. Patients may seek complementary and unconventional medicine or emerging treatments because of serious and/or chronic conditions and may be vulnerable to exploitation, including financial exploitation. Consumers who see direct-to-consumer marketing of 'therapies for health and wellness' may not realise that these are medical interventions with associated risks.

This is generally no different than conventional medicine. Conventional medicine can be expensive and may have uncertain results. The only difference is that it may be better subsidised than complementary medicine. Persons seeking conventional medicine are just as vulnerable to exploitation including financial exploitation. Exorbitant costs of conventional medicine such as scans, medicines, procedures also leave patients in a vulnerable position with respect to conventional medicine. The way to resolve this problem is not to target complementary medicine practitioners. I expect that consumers who see direct-to-consumer marketing of therapies realise that these are medical interventions with associated risks. In fact, in my experience, conventional medical practitioners have been more culpable of failing to warn me of associated risks of medical interventions.

It appears to me from the discussion paper that the Board takes the view that significant components of complementary and unconventional medicine and emerging treatments are controversial and baseless. Such a view is a mistake in my opinion. I grew up being particularly conservative in my views and it was not until I was faced with a chronic illness and failure of conventional medicine to ameliorate my condition that I was forced to explore alternative options. As noted already in this submission, I have found conventional and complementary medicine rather similar. Both have benefits and pitfalls. Both seek to put forward medicines and treatments which they consider will help which are often costly and have side effects to varying degrees. If anything I have found that the complementary medicines and treatments have less side effects than conventional. Both have varying degrees to which they sufficiently warn of side effects. Both have varying degrees of effectiveness. I have found that complementary medicine has proven to be quite effective for me in certain areas. As with conventional medicine you have to navigate the waters carefully and cross-check and research to ensure you are being guided in the right direction. But this is no different from conventional medicine.

### **Concerns as to practice**

The majority, if not all, of the concerns you have listed under the heading “Concerns as to practices” apply also to conventional medicine.

### **Areas of practice**

Under the heading “Areas of Practice” you list Lyme-like illness and Lyme disease as an area of concern. I do not suffer from this illness but am familiar with it and its practice in Australia. As discussed in the recent Senate Inquiry there is evidence that a tick borne illness (Lyme-like illness) exists in Australia. People who suffer from Lyme disease acquired overseas or Lyme-like illness acquired in Australia are grossly mistreated by conventional medicine practitioners. If anything, guidelines ought to be prepared to correct the mistreatment of such patients by conventional medicine rather than the other way around. There is significant debate in the medical community about the issue of Lyme disease/Lyme-like illness. You assert that some use non-accredited laboratories and diagnostic tests that are not well accepted. My detailed examination and research of this issue leads me to believe that there is significant plausibility behind some of the diagnostic tests used and significant respectability behind the majority of the non-accredited laboratories used. The treatment options of antibiotics outside “accepted” treatment protocols is also debatable. There is evidence that such treatment protocols assist patients with Lyme disease/Lyme-like illness. In addition, there is an enormous amount of antibiotic prescription within the conventional medicine sector outside the scope of “accepted” treatment protocols. It is unfair to single out complementary medicine alone in this regard.

### **Adverse events data**

In your section on “Adverse events data” you cite an example of death from stem-cell procedure. No doubt there are numerous examples also of death from conventional medicine including where there has been inadequate consent.

## **Complaints as a source of information**

In your section on “Complaints as a source of information” you highlight a number of examples many of which apply also to conventional medicine such as failure to consider differential diagnoses, treating most or all patients for the same condition, failure to refer patients, failure to manage co-existing medical conditions, providing inadequate consent, treatment outside accepted treatment protocols eg long term antibiotics in absence of identified infection, promoting indiscriminate use of health services without proven benefits, prescribing when not clinically indicated, complications from unnecessary treatments and high fees and complaints about financial exploitation. Again, it is unfair to single out complementary medicine.

With respect to long term antibiotics, I note that there are infections which are not easily identified and which are unidentifiable by testing such as infections in Reiter’s syndrome a condition which I have. Long term antibiotics is one treatment method offered to me and it ought to remain available.

## **Relevant tribunal decisions**

With respect to “Relevant tribunal decisions”, no doubt there are also conventional practitioners acting in questionable ways against whom action is taken.

## **Current regulation and guidance in Australia**

The Health Practitioner Regulation National Law and other codes and regulations referred to in the discussion paper adequately deal with the matters at hand without singling out complementary medicine practitioners.

## **Draft Guidelines**

With respect to the draft guidelines, as I have mentioned throughout my submission, many of the warnings in the guidelines apply equally to conventional medicine practices such as 1.5 and complementary practitioners should not be singled out.

1.4 – This is an unusual obligation to place on practitioners. It is very vague. Patients may unnecessarily come to think that their complementary and unconventional medicine or emerging treatment is disreputable when in fact it may not be.

4 – Aside from the general obtaining of consent, this section is onerous. Conventional medicine practitioners do not comply with the same standard. Section 4.2 is particularly onerous.

7 – This section also appears to be onerous and not required of conventional medicine practitioners.

## **Additional comment**

It seems to me that the proposed guidelines seek to place additional burdens on medical practitioners in Australia with respect to medicine outside the confined interpretations of a Western, allopathic perspective. This is unfortunate. We live in an age where we are lucky to have the benefit of broad perspective. There are numerous ways to practice medicine and numerous cultures and ideologies on the practice of medicine. For instance herbs have been used as a medicinal tool to great effect and with great sincerity in nations such as China and India for a long time. To single out



complementary practitioners is unfair and unnecessary. Consumers should have the opportunity to choose health care of their choice without additional burdens or limitations being place on their practitioners who practice a particular area. If someone believes in applied kinesiology or homeopathy they should be free to use it. Even if a procedure or medicine has potential adverse side effects consumers should be free to choose them provided that they have been appropriately warned (as it is with conventional medicine). As I pointed out above conventional medicine is as (if not more) guilty of failing to appropriately warn consumers of side effects.

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**From:**

**Sent:**

**To:**

**Subject:**

Tuesday, 25 June 2019 5:51 PM

medboardconsultation

My Choice

- I have chosen to see Integrative Medicine doctors because:
  - I want to be involved in my own and my family's care and this requires time in consultations an additional medical training that I found in my integrative medicine doctor.
  - Conventional medicine provided no answers about why I was sick and I needed medical care with a wider range of diagnostic and treatment options.
  - I have been harmed by conventional medical treatment, and needed to find other options.
  - I prefer non-drug approaches for managing my family's and my own health or illnesses.
  - I am happy with my GP for simple treatments within brief consultations, but I want to go further with prevention and a deeper understanding of what I can do for myself and my family. My integrative medicine doctor provides me the time and knowledge to do that.
  - I want more from my doctor. More time. More understanding of causes of illness. More power to understand the ways in which I can improve my health to reduce my need for drugs, surgery and medical appointments. My Integrative Medicine doctor provides these for me in a way that 10 minute consultations with doctors cannot.
- I have concerns about the proposed regulations because:
  - There is no demonstrated need to regulate Complementary Medicine or Integrative Medicine. These are safe practices that need no further regulation.
  - The only concern of the Medical Board of Australia in this process is, and should be, safety. The Chair has said this publicly. Questions about how effective Complementary Medicine and Integrative Medicine is should be a decision left to me.
  - The Medical Board of Australia includes members of the Friends of Science in Medicine, a political lobby group opposing Complementary Medicine and Integrative Medicine. This is a clear conflict of interest. The Medical Board of Australia should cancel the current consultation, and go back to the start with all current and past members of the Friends of Science in Medicine lobby group excluded from Board participation.
  - There has been no transparency in consultation process. Freedom of Information requests as to how these proposals originated have been

denied or redacted. The Medical Board of Australia has acted in secrecy and a failure to disclose the details of why the new regulations.

*I have chosen to see Integrative Doctors due to my chronic condition that Medical Doctors are not able to help me with and they take more tests and investigate further which gives me the option to choose alternative treatments that improve my quality of life. Without it I would not be able to live life with my disability. Please consider that this would have a detrimental effect on my health and ability cope with my ongoing condition.*

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 10:36 PM  
**To:** medboardconsultation  
**Cc:** [REDACTED]  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To the Medical Board of Australia,

I support Option 1.

Submission to MBA Consultation document on complementary and unconventional medicine and emerging treatments

Written by: [REDACTED], 30th June 2019

My name is [REDACTED] and I'm 57. I live in [REDACTED], Sydney. Five years ago, in 2014, I was suffering from many symptoms including blurry vision, sharp pains in my legs, joint pain, difficulty concentrating, difficulty walking and tiredness a lot of the time. So I went to my local doctor and he sent me to do a lot of tests – we checked my blood counts, liver and kidney. At first my doctor thought I could have Reactive Arthritis but this usually clears up and my symptoms didn't.

My local doctor sent me to other doctors and I did scans and X-rays but nothing showed up. I had a test for hemochromatosis but it came up negative. I did quite a few more tests and saw over 15 doctors and specialists during this first year of my illness and yet, we couldn't diagnose what was wrong.

In 2015 I went to see an integrative doctor and they looked over all of my tests and asked me about my symptoms. They also asked me about my environment – my home, what I ate and what my lifestyle was like. They asked a lot of questions – and this does take quite a bit of time. After a while, I told them the house I lived in was quite mouldy as we were planning to knock it down and rebuild, so we hadn't been concerned that there was a lot of mould on the walls and some cupboards.

The integrative doctor told me mould can affect some people quite strongly and have a strong impact on their health. They asked me to do a gene test and I came up positive for the MTHFR gene which means I don't expel toxins as well as other people without this gene. They said they thought I could have CIRS – Chronic Inflammatory Response Syndrome and they asked me to do some tests for this. I did these tests and it was confirmed I had high levels of mould mycotoxins in my blood and these levels have been shown to cause the symptoms I was experiencing.

If I had not seen this integrative doctor and had the time to talk with them and find out what could have been causing my illness, I could still be very sick. In fact, if I hadn't taken some action and moved away from the mouldy house and started treatment for CIRS, it's likely I would be very ill today. Often people who have CIRS but don't treat it, end up getting another chronic illness as the mould inhibits the immune system and this often leads to further illness.

I'm so glad I saw the integrative doctor and started taking action. They advised me to move out of the mouldy house and to move to a place which had no mould. They also advised me to get rid of most of my furniture as the mould gets into it as well. These were all major decisions I had to make and without an integrative doctor helping me on this journey to better health, I wouldn't have been able to achieve what I have done – which is to be feeling 95% better now in 2019.

As well as advising on moving out of my old house, my integrative doctor has also helped me cleanse my system of the mycotoxins, with supplements which help detoxify my liver and others which stabilise my system. As well, I'm on a diet which avoids food with high mould levels and this way, I'm not reacting to food and I'm feeling much more energetic.

If I had not seen an integrative doctor, no general practitioner would have thought to diagnose CIRS. While CIRS is more well-known now – this is only in the realm of integrative medicine. General practitioners are not trained in this illness yet. More people know about CIRS now because Liberal Parliamentarian, Lucy Wicks, called an Inquiry into it last year in August and some good recommendations came out of this including more training for GPs in this illness. I spoke at this Inquiry so my submission is written in Hansard.

The personal and financial cost of this illness has meant I've only been able to work part time for the past 5 years but luckily, I'm now able to work more on a full time basis. Over the past 5 years, I've been unable to spend time doing normal things in my spare time because I've had to remediate my possessions and keep working on recovering from this illness. It has had a great impact on me personally and financially. If we make it even more expensive to see integrative doctors, this will only make it more and more difficult to get the help I've received in order to get well.

I would like to ask the Medical Board of Australia to think of all the people with complex illnesses in Australia and to understand these people may not get diagnosed properly unless there are integrative doctors they can see. With less integrative doctors and with too many restrictions, there's a chance they won't see an integrative doctor and they'll just get sicker. This would be very unfortunate.

As well, I would ask the Medical Board of Australia to think about the many young children who suffer from a chronic illness and nothing seems to work for them – until they see an integrative doctor who looks at more factors and spends more time to find out what's affecting them in a negative way. Without these integrative doctors, these children will live a life of poor health and never really know what it's like to feel well.

People with enough money will be able to go overseas for integrative treatments but those without funding won't be able to do this and they'll have to put up with a chronic illness which could lead to something far worse.

Integrative medicine is very strong in some European countries including Switzerland and Germany – as well as in the US. Why can't we make this model work as well? Why do we have to choose between standard general practitioners and integrative doctors? Why can't we have both because they complement each other? We need the extra treatments and the skill at diagnosing complex illnesses which integrative medicine can bring.

Please consider all of the above when looking at this area of complementary and unconventional medicine in Australia.

I consent to publication of my submission.

Sincerely,

A black rectangular box redacting the signature of the author.

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**From:** [REDACTED]  
**Sent:** Tuesday, 26 March 2019 11:52 AM  
**To:** medboardconsultation  
**Subject:** Public consultation on complimentary and unconventional medicine and emerging treatments

To Whom it may concern,

It is greatly disturbing to read that your organisation is proposing new regulations to restrict Doctors practicing integrative or complementary medicine!

My questions are WHY? And WHO are you trying to protect?

What difference does it make how a patient gets well?

My own experience is that complementary and integrative medicine is usually more effective than pharmaceuticals.

In fact in the treatment of my depression pharmaceutical treatments were not only completely ineffective but gave me a number of side effects that made the depression seem preferable.

I see absolutely no reason to move from the current system. I am not an idiot and I am not going to keep paying for things that are not working!

Similarly I am more than confident of my own ability to discern a Doctors skill, knowledge and experience and that you feel you need to make these decisions for me is offensive.

I have a right to choose my treatment and the fact that my Doctor is an integrative professional is exactly why I choose to see her and it's a comfort to know I am not going to be prescribed some tablet because that's what everyone else does.

Honestly I find the whole notion of your organisation trying to impose your will and opinions on people quiet extraordinary and I urge to give people like me some credit for our intelligence and allow us to choose what is right, or wrong for our health!

Regards,  
[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, 4 April 2019 8:41 AM  
**To:** medboardconsultation  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments

Hello,

**I vote for Option 1 on page 2 of the proposal.**

At 30 I was very ill with Graves Disease. Conventional medicine treatments did not help and I was left feeling terrible with no energy. A naturopathic doctor did help me and my quality of life now is due to their treatment. Since then I've heard many stories where conventional medicine has not helped many people and naturopaths and Integrative Drs have. There is a place for both Drs, Integrative Drs and Naturopaths in Australia and it is our right to be able to choose the health care that works for us.

I think you are listening to the wrong people.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Sunday, 30 June 2019 6:50 PM  
**To:** medboardconsultation  
**Subject:** Fwd: Consultation on complementary and unconventional medicine and emerging treatments

I have chosen to see Integrative Medicine doctors because Conventional medicine provided no answers about why I was sick and I needed medical care with a wider range of diagnostic and treatment options. I have chronic fatigue and would spend 18 hours a day sleeping. The rest of time basically in bed. All doctors did was give me antidepressants which made no difference.

Kind Regards

[REDACTED]



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**From:** [REDACTED]  
**Sent:** Wednesday, 29 May 2019 3:39 PM  
**To:** medboardconsultation  
**Subject:** do no change to our freedom of choice

If no one is left to practice complementary medicine in Australia, I shall be dead. My challenges started in 1992 with conventional medicine for high blood pressure. I was given Capoten and seven months later, I was diagnosed with 'chemically induced lupus'. In the course of shuffling between doctors and stopping Capoten one doctor thought that hormone replacement therapy was warranted in view of hypertension and possibility of heart attack or stroke. HRT would prevent it. Later, trials showed that HRT was not the answer that doctors deemed it to be. After ten years, I was off HRT. So much for conventional medicine.

Years of conventional doctors left me with health that was not so good ie. reduced kidney function, high blood pressure, atrial fibrillation, hypothyroid, atrophic gastritis. I am thankful to have found a doctor now with clear advice on how to be well on my own volition. It does make a difference in one's well being if you are nutritionally balanced in vitamins and minerals from growing and eating good food. Being in a good mental place with meditation helps too.

If MBA does regulate with further guidelines that will restrict our care, who will be there to help people like me? Quality of life is important so just one more script from a doctor will not work for me. Every drug has some side effects as can be seen by the huge amount of money (775m) Bayer & Johnson & Johnson have set aside to settle lawsuits over anticoagulant injury and death. Leave well enough alone the good doctors of complementary medicine. We need them. I think conventional medicine just wants a bite of the 3.5 billion that is earned by complementary medicine.

I feel empowered to help myself so thanks but NO changes at least until conventional medicine is perfect. It will never happen! [REDACTED]

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**From:** [REDACTED]  
**Sent:** Sunday, 14 April 2019 8:08 PM  
**To:** medboardconsultation  
**Subject:** Medical Board Submission

Regarding the public consultation on clearer regulations of medical practitioners who provide complementary and unconventional medicine and emerging treatments.

As an Australian citizen I know it is important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

I have for the past years been suffering from:

Chronic fatigue  
Fybromyalgia  
Adrenal exhaustion

Conventional medical doctors have not been able to successfully treat my conditions and bring me to a satisfactory level of health.

Pharmaceuticals and the use of conventional methods simply did not work and in some instances also delivered unwanted side-effects in my case and, seemed to waste Medicare funds and resources.

It was only when I saw an integrative medical doctor who included lifestyle change, diet and supplements of vitamins to address my problems that my conditions began to improve.

If I cannot see an integrative medical doctor, or the doctor is restricted in what they are able to prescribe for me, I feel that my health will deteriorate and have continuing impact on my family and my wellbeing.

[REDACTED]

14 April 2019

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**From:** [REDACTED]  
**Sent:** Friday, 7 June 2019 9:10 AM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To whom it may concern,

As a patient of Integrative medicine and having experienced the positive impact it has had on my own health after years of living with Chronic Fatigue, I am voicing my concerns over the new guidelines that are being reviewed. I have sent family and friends who have experienced long term illness that no other doctors have assisted with to the same clinic of integrative doctors and they have all experience improvement in their own quality of life.

My concerns about implementing these new guidelines are as follows;

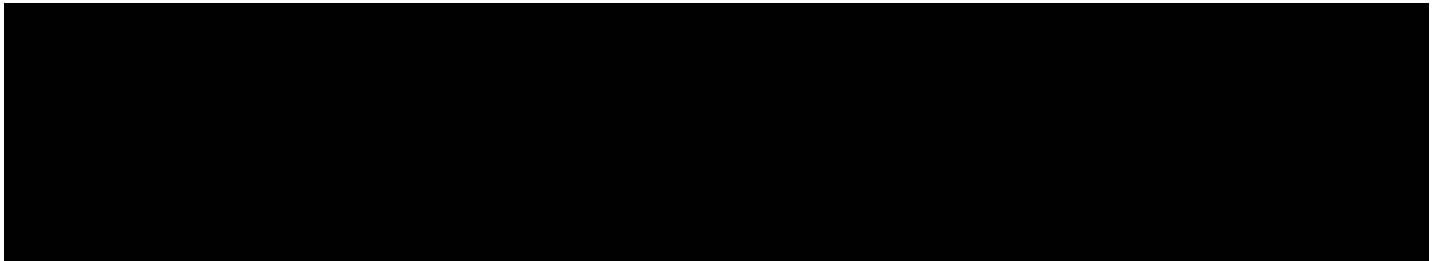
- The grouping of integrative medicine with 'unconventional medicine' and 'emerging treatments' may create the impression of being "fringe" rather than evidence-based
- That many of the terms used in the rationale such as 'unconventional medicine', 'inappropriate use' and 'emerging treatments' leads to ambiguity and uncertainty
- That the term 'complementary medicine' also includes access to traditional medicines
- No evidence produced in the discussion paper quantifies risk in practicing complementary or integrative medicine vs 'conventional' medicine
- That there was NO consultation with the Integrative Medicine or complementary medicine community before the document's release
- That the current Good Medical Practice: A Code of Conduct for Doctors in Australia already adequately regulates doctors' practise and protects patient safety. There is no need or justification for a two-tiered approach
- That the right of patients to determine their own medical care is under threat
- That the lack of clarity on how to determine what is 'conventional' versus 'unconventional' can be misused by people with professional differences of opinion which results in troublesome complaints

I fear that your new guidelines could have a negative impact to a lot of people like myself that have lived with illnesses or conditions that have been ineffectively treated by 'conventional medicine' as you have so put it. And that more people will become further unaware of the greater medicinal community that can provide more holistic approach to medicine and treat these people that 'conventional medicine' has let down so badly.

I eagerly await your response.

Kind Regards,

[REDACTED]



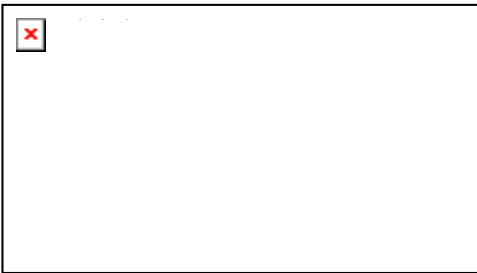
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**From:** [REDACTED]  
**Sent:** Sunday, 17 March 2019 12:50 PM  
**To:** medboardconsultation  
**Subject:** Public consultation on clearer regulation of medical practitioners on complementary and unconventional medicine and emerging treatments

I am already dismayed at the action taken against natural therapies and the removal of these ancillary items from Health Funds in Australia. I would not have my 2 children if it weren't for Traditional Chinese Medicine working in conjunction with IVF! I have adrenal fatigue which most GPs don't understand or recognise and the only healing support I get for this is from natural therapies such as naturopathy. I believe big pharma are behind the deconstruction of the natural therapies industry. Their agenda is self-serving and pursuing their agenda to control medical practitioners practicing complementary or unconventional medicine is a conflict of interest and more about removing the freedom of choice for consumers and the Australian public.

I think the ABC raises great points in relation to this matter:

<https://www.abc.net.au/news/2012-02-21/schwager-war-against-natural-medicine/3840682>



### War against natural medicine - ABC News (Australian Broadcasting Corporation)

Around 400 high profile doctors, medical researchers and scientists recently joined forces to form lobby group Friends of Science in Medicine (FSM) in order to have "alternative medicine" degrees ...

[www.abc.net.au](http://www.abc.net.au)

I wish for you to consider the interests of health consumers and not the interests of big pharma when deciding on how to regulate medical practitioners practicing complementary or unconventional medicine.

Best wishes

[REDACTED]  
NSW

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**From:** [REDACTED]  
**Sent:** Friday, 7 June 2019 9:49 AM  
**To:** medboardconsultation; ministerforhealth@sa.gov.au  
**Cc:** [REDACTED]  
**Subject:** My Concern

To whom it may concern,

As a patient of Integrative medicine and having experienced the positive impact it has had on my own health after years, I am voicing my concerns over the new guidelines that are being reviewed.

I have sent family and friends who have experienced long term illness that no other doctors have assisted with, to the same clinic of integrative doctors and they have all experience improvement in their own quality of life.

My concerns about implementing these new guidelines are as follows;

- The grouping of integrative medicine with 'unconventional medicine' and 'emerging treatments' may create the impression of being "fringe" rather than evidence-based
- That many of the terms used in the rationale such as 'unconventional medicine', 'inappropriate use' and 'emerging treatments' leads to ambiguity and uncertainty
- That the term 'complementary medicine' also includes access to traditional medicines
- No evidence produced in the discussion paper quantifies risk in practicing complementary or integrative medicine vs 'conventional' medicine
- That there was NO consultation with the Integrative Medicine or complementary medicine community before the document's release
- That the current Good Medical Practice: A Code of Conduct for Doctors in Australia already adequately regulates doctors' practise and protects patient safety. There is no need or justification for a two-tiered approach
- That the right of patients to determine their own medical care is under threat
- That the lack of clarity on how to determine what is 'conventional' versus 'unconventional' can be misused by people with professional differences of opinion which results in troublesome complaints

I fear that your new guidelines could have a negative impact to a lot of people like myself that have lived with illnesses or conditions that have been ineffectively treated by 'conventional medicine' as you have so put it. And that more people will become further unaware of the greater medicinal community that can provide more holistic approach to medicine and treat these people that 'conventional medicine' has let down so badly.

The Medical Board of Australia's prime responsibility is to protect the public from medical harm. Under this responsibility they have issued this consultation paper that, through the way it has been written, will affect your freedom of choice for health care and limit the options your doctors can inform you about.

Your freedom for choice is under attack! This simple site has been set up to help the countless number of people all over Australia who have, currently are or about to begin integrated or complementary medical treatments to place submissions in support of keeping their freedom of choice.

Several years ago my husband was diagnosed with Cancer, we went to the doctors they gave us all the options. We were extremely lucky that our doctor advised us of procedures that were not covered under Medicare and there would be out of pocket expenses, but they were very beneficial to his treatment. We made that choice and paid the extra.

We had a surgeon advise us to "go lay on a beach and get some vitamin D, we did.

We meet a Retired Integrated GP from Sydney who explained what it is that they do compare to a normal GP. When we returned back to [REDACTED] we found one and the first thing they did was take blood test and analysis. My husband now takes Vitamin D doses, as we all know the sun alone does not provide us enough. Slip Slop Slap.....

No GP has every given told us this, just get your vitamins up they say.

Our son who was medically discharge from the Military as they could not “fix” him, we toke him to see an Integrated doctor and they have got him off all Medication that they Military doctors had him on, increased his Vitamin D levels, found that he had intolerance, now 12 months done the track I have a different son, with no signs of his Chronic Fatigue. This kids lost 6 years of his life though miss diagnoses.

Back to my husband, since his diagnosis, we have had 4 acquaintances go through the same treatment, all very unsuccessfully, as they have followed their doctors instructions and not looked out side the square. (this is freedom of choice and if doctors cannot guide you through this then how are you meant to know).

These are simple examples, but they have worked for my family.

We have so many intolerances these days compare to a couple of decades ago – Why?

If we go to a GP and say we don’t feel well they give you a script – Why?

When you are really sick and you go to the doctor that script doesn’t work so we have to give you a harder script – Why?

Why are we so dependant on drugs rather than looking for alternative cures / practices.

Kind regards

Apart from the scientific interest attached to my various journeyings, it has been made clear to me that human needs and aspirations differ little the world over and that no great difficulties arise in one race dealing with another when matters of scientific importance are involved. Howard Florey

[REDACTED] [REDACTED] [REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, 26 June 2019 3:48 PM  
**To:** medboardconsultation  
**Subject:** support integrative doctors

**Importance:** High

Firstly, would I waste my time going to see any medical person for any reason that was not open to natural therapies?

No I would not. I would be wasting both my time and money.

The narrow minded attitude of trying to block any medical practitioner that is also qualified in any of the following is ridiculous and archaic:

Naturopathy (that if you don't know comprises of the following modalities):

Nutrition

Western herbal medicine

Homoeopathy

Iridology

and Remedial massage

These are the original modalities taught for a Naturopathic qualification but of late changed to no longer include Remedial massage and some no longer include homoeopathy.

Where did conventional medicine come from? Originally plants! The molecular structure was studied of relevant plants and then copied to create drugs – by Big Pharma – many of which cause many side effects since they are no longer in a natural state.

Herbal medicine has been used for thousands of years in the West and also East.

Doctors who study Chinese medicine may also include Chinese herbs along with acupuncture. Some who are also trained in Naturopath and/or Western herbal medicine may prefer to work with Western herbs

Either way, all such natural substances have been used successfully for thousands of years.

All the scientific evaluations you require now are unnecessary in many instances since proof is in the person becoming well and pain free. You still wish to test it fine, but many work.

I personally would never use any pharmaceutical medication due to all side effects.

To penalise a medical doctor since they prove to be qualified in any of the above and believe in natural therapies that work effectively to help people is no better than a crime.

Australia is a backward country in many ways and blocking freedom of choice for natural substances and treatments shows how archaic the government and medical board is, but I would extend myself to say maybe some of the board are paid off by Big Pharma to block these therapies.



You need to realise that people power has made many changes over the years in many countries and people will continue to seek help for any of the above. The media often airs programs with inadequate information on any of the above leaving the public puzzled and uncertain about its ability to work effectively.

You must not prevent medical doctors who are qualified in any of the above from using and scripting and nor interfere and stop Natural Medicine practitioners who often know more than most conventional trained medical practitioners.

Nutrition

is a prime example where only 6-8 hours of tuition is in the medical curriculum what a joke.

So shape up and get this country moving forward with all options of medicine to help people. If you don't I can see many will continue regardless and people will seek help in NZ and overseas – I had to fly to the USA twice since 6 eye doctors here in Sydney failed to detect a mechanical issue with my eyes (glaucoma) where the angles kept narrowing. Not one of these doctors saw it. The doctor in Texas who did provided me with a referral for a PI laser – simple he said, back here nobody would acknowledge he was correct. I knew he was I could feel the slight ache in my L eye for over a year and what he showed me and described to me reflected on a passed car accident with head impact. I had to fly back within 6 weeks to receive a simple PI laser that could have been done here for \$500 and no stupid glaucoma specialist saw it. The ache ceased after the PI and never returned be it now 6 years later. I finally found a glaucoma specialist who was receptive to me and saw instantly PAS in my eye upon examining. The bad attitude of some of those doctors I saw made me wonder how they can maintain their job by lacking empathy and compassion and being down right arrogant and rude. A miserable lot that cost me a lot of money trying to find someone who was supportive.

So that example is on purely conventional doctors so I guess the medical board is not in a position to critique natural therapists

or medical practitioners wishing to use any of the above – there are problem people in all walks of life

I've been in Australia almost 46 years – I've loved this country, but I am having second thoughts about how negative the

health system is right now, attitudes of doctors and the bad media portraying wrong information on any of the above.

Don't even get me started on the USA. Their laws in various states are equally backward excepting CA where it is legal

to have cannabis. We should be allowed to have it here for pain management and other serious disorders like cancer

but are archaic backward medical board and government don't appear to give a damn about the Australian people

I have to wonder if you are all being paid off by Big Pharma with hope to make this country so conventional that we can't

walk out of our home without swallowing drugs and someone sticking a needle in us.

Shape up! Get it right! think of the people and the future of this country, don't ruin it by introducing such manipulative rules on health choices.

Regards



**From:** [REDACTED]  
**To:** [medboardconsultation](#)  
**Subject:** Public consultation on complementary and unconventional medicine and emerging treatments  
**Date:** Tuesday, 19 March 2019 11:07:07 PM

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**Medical Board Submission:**

Regarding the public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments

As an Australian citizen I feel it's important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

I have been suffering from a range of medical conditions including hypothyroidism, adrenal insufficiency, chronic urticaria and eczema, severe allergies, as well as chronic pain. I am only 27 years old and have been suffering for years, unable to fully contribute to society in a meaningful way. I have had to put my PhD on hold due to illness.

Conventional medical doctors have not been able to successfully treat my condition(s) and bring me to a satisfactory level of health.

Pharmaceuticals and the use of conventional methods simply did not work (and in some instances also delivered unwanted side-effects in my case) and, seemed to waste Medicare funds and resources.

It was only when I saw an integrative medical doctor who included lifestyle change, diet and supplements of vitamins and minerals to address my problems that my condition began to improve.

If I cannot see an integrative doctor, or the Doctor is restricted in what they are able to prescribe for me, I feel that my health will continue to deteriorate and have a continuing impact on my family, my work, and my wellbeing. I am also going to suffer under the upcoming changes to private health care, and will be cancelling my fund as a result.

Concerned,

[REDACTED] 19/03/2019

## Medical Board Submission

Regarding the public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments

As an Australian citizen/resident I feel it's important that I have the freedom of choice in the type of medical care that I use to address my chronic health issues.

My 24-year-old son has been diagnosed with schizoid affective disorder. Under the guidance of an Integrative doctor in Melbourne he has been using a nutrient program for the past 2 and a half years which has produced wonderful results. This program is based on research by William Walsh Ph.D. Several doctors in Australia have studied under William Walsh, an American scientist. Our son prior to this treatment lead a dysfunctional life being suicidal, highly anxious, hostile, plagued with abnormal thinking and various other disturbing symptoms. He was hospitalized several times and was a client with the Mental Health system, all at great Government expense. He is now happy, free of those disturbing symptoms and attending La Trobe university where he is attaining very good academic results, all due to his nutrient program. The conventional methods did not achieve the results the nutrient program has achieved. It was only when my son saw an Integrative doctor and started the William Walsh nutrient program that his condition began to improve. If my son cannot see an Integrative doctor or the doctor is restricted in what he or she is able to prescribe my son, his mental health will deteriorate which will have an adverse impact on our family, his studies and his wellbeing. Our son will need to take these supplements all his life and without them he would become unwell again which would be senseless and heartbreaking to watch.

Concerned,

Name:

[REDACTED]

Signature:

[REDACTED]

Date: 23<sup>rd</sup> April 2019

Occupation: Teachers

Please submit to: [medboardconsultation@ahpra.gov.au](mailto:medboardconsultation@ahpra.gov.au)

Please mark email subject as: Consultation on complementary and unconventional medicine and emerging treatments

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**From:** [REDACTED]  
**Sent:** Wednesday, 3 April 2019 6:01 PM  
**To:** medboardconsultation  
**Subject:** Consultation on complementary and unconventional medicine and emerging treatments

To whom it may concern

I write to you today in regards to the Public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments consultation paper.

I am appalled by this consultation paper.

**I whole heartedly vote Option 1** - Retain the status quo of providing general guidance about the Board's expectations of medical practitioners who provide complementary and unconventional medicine and emerging treatments via the Board's approved code of conduct.

It is my understanding that Doctors undertake a pledge that includes

- \* THE HEALTH AND WELL-BEING OF MY PATIENT will be my first consideration;
- \* I WILL RESPECT the autonomy and dignity of my patient

The medicinal drugs I take have vast lists of side effects that can cause liver or kidney damage from prolong use. And this damage is evident in my father from years of pain medication.

According the Pharmaceutical Society of Australia 2019, 650,00 patients were hospitalised with medication issues and thousands die each year from medication issues.

Yet I am yet to know of a single case where someone taking fish oils has caused death.

You have failed to identify any significant concerns as the safety of integrated medicine when compared to traditional medicine.

The medical industry continues to gauge the consumer making it prohibitive in some cases to access appropriate medication.

Yet your proposal creates unnecessary guidelines, as the current Code of Practice already addresses all safety and efficacy issues related to Integrative Medicine.

Is it your view to cost me as a tax payer more to fund this, or me as a patient more!

Integrated medicine has it's pace as does Traditional medicine.

Let's leave as is and let me the patient decide by RESPECTING the autonomy and dignity of me the patient

[REDACTED]