

# Medical Board consultation on complementary and unconventional medicine and emerging treatments

## Feedback from the Australian Medical Students Association

**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?**

AMSA agrees with the proposed term; AMSA’s policy uses the term complementary and alternative medicine (CAM).

**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?**

AMSA defines a CAM as any in a wide range of products and treatments with therapeutic claims that are not presently considered to be part of conventional medicine, which aligns with the proposed definition.

**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’?**

Yes, we agree with the issues identified in relation to CAM practitioners.

**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?**

AMSA believe the concerns identified as the most pertinent ones and has no other concerns.

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

All medical practitioners, regardless of if they practice CAM or not, should consistently take a comprehensive history which includes CAM use and understand the risk, benefits and interactions of various CAMs. This is to avoid potential adverse health outcomes due to drug or treatment interactions and potential complications.

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

Please find AMSA’s [Complementary and Alternative Medicine policy](#).



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**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?**

No, current regulation does not provide enough specificity around CAMs and is only derived from broader guidelines that address medical practice as a whole. As identified in the discussion paper, there is no leading "college" or "association" for CAMs and it is thus, self-regulated.

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

Yes.

**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?**

AMSA believes that medical practitioners should recognise that there are various cultural factors which may contribute to patient choice to uses CAMs. This could possibly be included in 1.6.

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

None 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?**

AMSA agrees with option 2.

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.

**For further consultation of questions please feel free to contact:**

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