

First Conference on Complementary and Alternative Medicine in the European Parliament

On October 9th, at the [European Parliament \(EP\)](http://www.europarl.europa.eu/portal/en) (www.europarl.europa.eu/portal/en) in Brussels the conference “Complementary & Alternative Medicine: Innovation and Added Value and Saving for European Healthcare” took place. It was organized by the EUROCAM cooperative, which represents several international umbrella organizations for Complementary and Alternative Medicine (CAM) including medical doctors’, health practitioners’ and patients’ organizations. The IVAA was one of the leading organizers. This was the first ever CAM presentation in the EP. From this starting point, Anthroposophic Medicine (AM) has a good strategic position within the joint presentation of different CAMs. Technical preparation and running of the conference was conducted by [EPHA](http://www.ephah.org) [European Public Health Alliance], a very active public-health platform NGO of which IVAA is a member organisation (which represent no CAM specific interests).

Within the conference, to which the Members of the European Parliament (MEPs) and their staff were invited, a range of experts presented the advantages of CAM and also questioned some broadly applied non-CAM treatments. Among the speakers was Erik Baars, Professor of [Anthroposophic Healthcare, University of Applied Sciences, Leiden](http://www.hsleiden.nl/lectoraten/antroposofische-gezondheidszorg/), (www.hsleiden.nl/lectoraten/antroposofische-gezondheidszorg/) the Netherlands. The programme and all presentations can be downloaded from: www.ivaa.info/?p=164. MP3-records of the conference as well as some photos can be found on the [IVAA iCloud](https://www.ivaa.info/).

As the different presentations showed, 25-80% (depending on what is counted specifically) of the EU population has already used CAMs. The advantages of CAMs are not only direct positive effects on health, but also increased health literacy and healthier lifestyle. In addition, they are more cost effective: they are not oriented towards a regular use of biochemical, ‘strong’ medicines, but aim for sustainable maintenance and regeneration of health. CAMs also provide an added value as they offer additional treatment options, especially for indications where traditional medicine turns out to have no proven effects.

However, the legal status of CAMs differs from one EU country to another as well as from one kind of CAM to another. For example kinesiology may be fully integrated in the national health system of one country, including coverage of costs, and at the same time not at all recognized as medical treatment in another country. The reason for this is a lack of positive European regulation safeguarding CAMs by recognizing their specific system approach. This problem also concerns AM, which is only fully available in a few EU countries.

In order to foster knowledge and awareness in Europe about the potential of CAMs and the need for legal improvements on the European level, the conference launched a [“Call for Action”](http://www.ephah.org/a/5387) (www.ephah.org/a/5387) paper. This may be referred to later to remind EU institutions of CAM’s concerns.

The conference was surrounded by a three-day exhibition, consisting of 17 posters about different kinds of CAMs as well as patients’ organizations. Homoeopathy, Acupuncture, Anthroposophic Medicine, Reflexology, Shiatsu and also [ECHAMP](http://www.echamp.eu/) (www.echamp.eu/) were there with information stands, presentations or slide shows. This exhibition reached a lot of people in and around the EP: MEPs, their staff, staff of the European Commission (the “government” of the EU), journalists and translators. more than a hundred copies of the book “Anthroposophic Medicine” by [Kienle, Kiene and Albonico](http://www.kienle.com) (available from AAMA) and other papers. There was an astonishing openness, showing at the same time that further, especially French language information about AM is required.

The common problems encountered by different kinds of CAM (like the insufficient legal status) and the chance to be more visible show that this joint action of different CAM partners is a fruitful way forward. In addition, political stakeholders who are not familiar with different kinds of CAM may be reached more easily by professionalizing lobby work within such alliances. The conference of EUROCAM in the EP was another milestone towards addressing the political concerns of AM at the European level. A next step will follow soon: on November 29th 2012, a conference presenting the results of the [CAMBRELLA](http://www.cambrella.eu/home.php) (www.cambrella.eu/home.php) research project. This will further strengthen the cooperation of CAM-partners and the visibility of CAM on the European scientific and political level. As further steps we hope to, amongst others, attend major European health policy events (such as the annual [European Health Forum at Gastein](http://www.ehfg.org/home.html) [/www.ehfg.org/home.html]), foster ongoing contacts with the European institutions and promote improvements of EU regulation concerning AM.

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