Preface

With this edition of *Biomedical Ethics Reviews* we commence a somewhat new focus for the series. Building on its solid tradition of exploring and debating pressing bioethical issues of the day, this series will now also examine the real-life implications of these issues for patients and the health care system in which care is delivered. With each topic, attention will be focused not only on the theoretical and policy aspects of ethical dilemmas, but also on the clinical dimensions of these challenges, and effects on the patient–physician relationship.

A fitting early topic for *Biomedical Ethics Reviews* in the 21st century is complementary and alternative medicine (CAM). The National Center for Complementary and Alternative Medicine (NCCAM) defines CAM as “a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine.” A telling definition, for what it actually seems to define is what CAM is not. We will probably be coming to terms with CAM and its value in promoting the health of the mind, body, and spirit, its approaches to the causes of illness, and to the restoration of the balance that is health, for some time. Chapters 1 and 2 in *Complementary and Alternative Medicine: Ethics, the Patient, and the Physician* provide a context for thinking about CAM and introduce the history and definitions of CAM.

Another aspect of how we define CAM focuses on questions yet to be resolved through scientific studies about whether such therapies are safe and effective against the illnesses and conditions for which they are used. An editorial in one of medicine’s leading journals, *JAMA* (1998;280:1618-1619), said, “There is no alternative medicine. There is only scientifically proven, evidence-based medicine supported by solid data or unproven medi-
cine, for which scientific evidence is lacking.” Yet, as is raised in Chapters 3, 4, and 7 on CAM and the physician’s ethical obligations; communicating with and advising patients about CAM; and CAM research, respectively, we do not necessarily have that scientific evidence for many so-called conventional therapies. How to review CAM under the scientific method is further explored in Chapter 7. And, of course, what is considered CAM will continue to be a moving target, as evidence of safety and effectiveness moves CAM therapies into conventional medical practice.

In the meantime, it is estimated that approximately 42% of Americans spent $27 billion out of pocket on CAM therapies in 1997. This, according to a 2005 report of the Institute of Medicine (IOM) of the National Academy of Sciences, Complementary and Alternative Medicine in the United States. The IOM found a huge increase in CAM use over the period 1990 through 1997, with the total number of visits to CAM practitioners rising 47%, to 629 million visits in 1997. That surpasses total visits to primary care physicians for that year at 386 million. Most people do not tell their physicians about their CAM use, with implications for the patient-physician relationship and the ethics obliga-
tions of physicians (Chapter 3), advising patients (Chapter 4), patient education (Chapter 5), and liability concerns (Chapter 6).

CAM therapies are extremely popular with baby boomers, who take a very active interest in their health and health care and presumably will do so even more as they age. And as they age, the boomers 65 and older are expected to grow to 20% of Americans (more than 66 million people) by 2030.

NCCAM, on the other hand, is quite young, only established by Congress in 1998. Its mission is to explore complementary and alternative healing practices in the context of rigorous science, train CAM researchers, and disseminate evidence-based information to the public and health care professionals. Its 2004 fiscal year budget for this ambitious agenda was $117,752,000. So, with big issues and big money at stake, how are patients, physicians, the health care system and policymakers handling the explosion in CAM interest and use? What implications does it
Preface

have for traditional patient-physician relationships? What are the physician’s ethical obligations in this area? These topics and more are examined in *Complementary and Alternative Medicine: Ethics, the Patient, and the Physician.*

*Lois Snyder, JD*