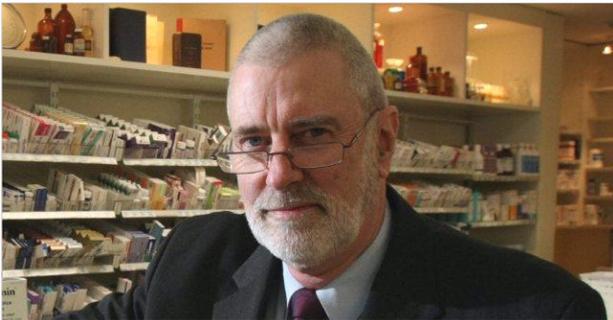




# Friends of Science in Medicine

Newsletter 15 - 31 March 2017



**Dr Ken Harvey**

## FOUR CORNERS PRODUCTION

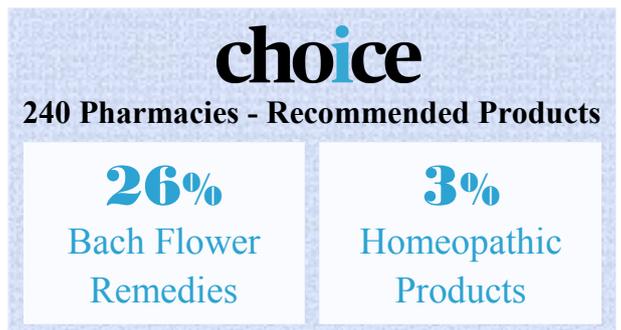
### 'Swallowing It'

(Aired 13 February 2017)

Dr Ken Harvey, an FSM executive member, and his Monash University students involved in a 'Whack-a-mole' project, featured in a recent ABC *Four Corners* program: "[Swallowing It: How Australians are spending billions on unproven vitamins and supplements](#)".

With seven out of ten Australians taking a complementary medicine, *Four Corners* looked at the regulation and marketing of these products. For many years, CHOICE and other consumer advocates have expressed concern about pharmacies' selling products which [lack evidence that they're effective](#) – such as [Bach flower remedies](#), (which are made from a diluted tincture of flower petals [which supposedly retain healing powers], water and alcohol) and homoeopathic products – alongside prescription medicines and over-the-counter medicines which have been properly trialled and shown to be effective. Placement in pharmacies of these alternative products gives them undeserved credibility, potentially misleading consumers about their likely effectiveness, while undermining the professional integrity of the scientifically trained pharmacists.

The show centred on a [CHOICE 'shadow shop'](#) of 240 pharmacies, where each shopper was asked to approach the prescription-dispensing counter and ask for advice from a pharmacist, stating, "I've been feeling really stressed lately, is there something you can recommend?" Worryingly, 26% of pharmacists recommended products based on Bach flower remedies and 3% recommended homeopathic products, for none of which there is evidence of effectiveness.



Continued.../2

-  [www.scienceinmedicine.org.au](http://www.scienceinmedicine.org.au)
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**Professor Stephen King**

Professor Stephen King (who is involved in a review of [Pharmacy Remuneration and Regulation](#)) commented that he was told of a pharmacist who provided homeopathic infant drops to a young mother concerned about her first child. The pharmacist said, "Well, yes I know it was just a placebo, but the mother would've gone away and the baby would've probably quietened down of its own accord, the mother would've been less worried." This raises serious ethical questions as to how much (and for what reward) a professional asked for advice should deliberately mislead a client.

Carl Gibson, (CEO of Complementary Medicines Australia) spoke for the industry and defended homeopathy. "There are positive studies on hay fever, on children's diarrhoea, smaller studies which you're welcome to look at and share, but they just didn't meet the bar set by the NHMRC for quality evidence," he said.

The National President of the Pharmacy Guild, George Tambassis, said: "The Guild believes that pharmacists, as highly trusted health professionals, have a duty of care to be aware of available clinical evidence that supports the therapeutic and marketing claims made about products sold in their pharmacies."



Blackmores and Swisse, who invest over \$100 million per annum in advertising their products, declined to be interviewed. The RMIT, Swinbourne, La Trobe, University of Western Sydney and the University of Sydney, all of which have accepted funding from Blackmore or Swisse, also declined.

## WHAT'S NEW SINCE OUR LAST NEWSLETTER?

### Happy Anniversary

On 20 December 2016, FSM celebrated our 5th anniversary!

We would like to thank our growing number of supporters and others who share our passion for 'good science in medicine' for their continued support as we continue to make a difference.

### Emeritus Professor Jeffrey Robinson CBE joins FSM!



**Emeritus Prof Jeffrey Robinson CBE**

Named after renowned obstetrician Professor Jeffrey Robinson, the [Robinson Research Institute](#) brings together more than 50 world-leading researchers who are internationally renowned for their ground-breaking research and translation into clinical care and health policy. Professor Jeffrey Robinson has added his name in support of FSM.

### Congratulations!

One of Dr Harvey's Monash University students won the best Monash Summer School Scholarship presentation.

The School of Public Health and Preventive Medicine [Summer Vacation Scholarship Program](#) supports the education of promising tertiary students by providing a means to engage, and to gain experience, in research during the University summer vacation.





In December 2016, two Monash Biomedical Science/Law Summer Scholarship students (Sasha Hall and Tiana Moutafis) worked with Dr Ken Harvey on his 'Whack-a-mole' project. This involved submitting complaints about the promotion of complementary medicines to the regulators, media engagement and a submission to the TGA on regulatory reform.



Each made a video about their involvement in the 'Whack-a-mole' project for assessment as the best Summer School presentation:

<https://www.youtube.com/watch?v=iXS1TdjQcA&feature=youtu.be>

<https://www.youtube.com/watch?v=3ZCp-yZlq80&feature=youtu.be>

One won the best student award. Which do you think it was?

Additional students involved in the 'Whack-a-mole' project earlier in the year (along with Sasha and Tiana) also featured in a recent ABC Four Corners program: "[Swallowing It: How Australians are spending billions on unproven vitamins and supplements](#)"

## SOCIAL MEDIA NEWS

FSM thanks Dr Lewis Donovan and Dr Chamitha Weerasinghe, for their considerable contribution to social media over the past year. After 12 months of selecting great articles, they have left the team.



We welcome Dr Dean Talia PhD, an Immunology and molecular microbiology scientist.



Dr Pallave Dasari and her social media team have now attracted more than 6,200 'Fans' in Facebook and over 1,300 in Twitter.

Evenly distributed between men and women, 60% of our Facebook 'Fans' are between 25 and 44 years old.

## FSM EXECUTIVE NEWS

### 2016 Australian Skeptic of the Year

The 2016 Australian Skeptic of the Year was jointly awarded to Mal Vickers and Ken Harvey for their continued and determined efforts which have made a significant impact on [exposing malpractice in the chiropractic industry and its governing bodies](#).



### Life Membership

Amongst those receiving Life Membership of Australian Skeptics Inc was FSM CEO, Loretta Marron.

### Bent Spoon Award

This year's recipients of the Bent Spoon award went to anti-vaccinationist Judy Wilyman, her academic advisor, Brian Martin, and the Social Sciences Faculty of the University of Wollongong, for awarding her anti-vaccination thesis a doctorate on the basis of "a PhD thesis riddled with errors, misstatements, poor and unsupported 'evidence' and conspiratorial thinking".





Professor Rob Morrison, FSM Vice-President, was awarded Honorary Life Membership of the Australian Science Communicators at their recent national conference.

Dr Harvey's presentation at the 2016 Australian Skeptics Conference was titled "[Improving the Regulation of Complementary Medicines in Australia: The Current State of Play](#)" and Loretta Marron's presentation at the New Zealand Skeptics Conference was "[Crazy, Cruel Cancer Cures](#)".



Prof Rob Morrison

## Complementary & Alternative Medicine



Frank Van der Kooy's Blog - the view of a previous insider!

[The NICM's undeclared conflicts of interest. Is there some ministerial interest in this?](#)

Analytical Chemist, Dr Van der Kooy, exposes pseudo-academia and vested interests.

## UNIVERSITIES

### Macquarie University



[Published](#) on 1 November 2016, a [cross-sectional assessment](#) of the views of Australian general practitioners towards chiropractors and osteopaths, funded by the Department of Chiropractic at Macquarie University, found that "attitudes may have become less favourable with a growing intolerance towards both professions" and that GPs were "[turning against them](#)".

The national survey highlighted the fact that more general practitioners believed that chiropractic education, compared with osteopathic education, was not evidence-based (70% and 50% respectively), while the scope of practice was viewed as similar for both professions. A minority of general practitioners had referred a patient to either profession (chiropractic: 40%; osteopathy: 34%) and indicated that they would not want to co-manage patients with either profession.



Approximately two-thirds of general practitioners were not interested in learning more about the education of chiropractors and osteopaths (chiropractors: 68%; osteopaths: 63%).

The chiropractors who conducted the survey blamed the shift in GPs' views on the questioning of the legitimacy of complementary medicine and "highly emotive" comments by Friends of Science in Medicine and other groups.

In May 2016, *Australian Doctor* magazine wanted to know if GPs were going to follow [the RACGP's call](#) and not refer to chiropractors. Their [on-line poll](#) found that less than 30% of GP's referred patients to chiropractors.

### RMIT University

FSM wrote to RMIT about our concerns that they and other institutes are giving undeserved credibility to a myriad of unsupported claims for efficacy through the courses they offer.

We urged Professor Charlie Xue, Executive Dean, School of Health and Biomedical Sciences at RMIT, who supports Chinese Traditional Medicine, to look at the websites of RMIT TCM/ Acupuncture graduates.



Students are easily persuaded by experienced practitioners to embrace belief-based practices uncritically, particularly when these are taught in a university. Prof Xue continues to support these alternative medicine courses at RMIT.

## BREAKING the LAW

FSM believes that higher education courses should be consistent with the National Law. However, a large number of [acupuncture graduates](#), by advertising non-evidence-based care and by practising it, are breaking that law.

We urged Professor Xue to consider the ethics associated with his support for unscientific and potentially dangerous clinical practices and to do so in the context of his university's long-held commitment to scientific excellence. We sent him a copy of our [acupuncture review](#) which concludes that acupuncture is a placebo and asked him to vigorously review his teaching about acupuncture and to withdraw his Masters of Applied Science (Acupuncture) course.

As Professor Xue stated that he did "not agree with [our] conclusion re acupuncture", we asked him, "What evidence does your University have that shows that the conclusions of our review are invalid?" He also asked if FSM supported "evidence-based development for all health interventions". We responded that the FSM Exec has now met with AHPRA on seven occasions and continue to have regular meetings on this topic. To-date, FSM has met with the Chairs of the Physiotherapy, Chiropractic and Osteopathy Boards. FSM [supports evidence-base](#) interventions in all health treatments.

### Monash University



As mentioned above, Dr Ken Harvey, through the Monash 'Whack-a-mole' project, has been successfully teaching students "How to lodge a complaint about unethical promotion of therapeutic goods and services and what to expect". The presentation can be seen [here](#). It suggests that the current regulators are 'paper tigers' and it reiterates the need for regulatory reform. (Why 'Whack-a-mole'? Because, given the flaws in the current regulatory system, no sooner is one misleading advertisement 'whacked' then others immediately pop up! )

### University of Western Sydney



**Bent Spoon  
Award**

Considered [too reliant on sponsorship to carry out independent research](#), Professors Alan Bensoussan, Gregory Kolt and Barney Glover, from the National Institute of Complementary Medicine [NICM](#), School of Science and Health, [were nominated](#) for the Sceptic Society Bent Spoon Award for "continuing to fully support and defend the use of homeopathy and other unbelievable complementary medicines. For ignoring the detrimental impact that their approach has on science, scientific education and the general health and well-being of the Australian population."

### University of Sydney

From 2018, the Faculty of Pharmacy will offer a 'Graduate Certificate in Evidence-Based Complementary Medicines'. The new Graduate Certificate will primarily be delivered on-line and will comprise four subjects, which can be completed full-time in one semester or part-time over two or more semesters. The Faculty of Pharmacy has also recently integrated complementary medicine education into its Bachelor of Pharmacy and Masters of Pharmacy degrees.



**Maurice Blackmore**



The University hopes to finalise the appointment of a Maurice Blackmore Chair in Integrative Medicine by mid-2017.

FSM will monitor the independence, critical thinking and level of evidence for complementary medicines emanating from these courses.

## James Cook University



A '[Healing Touch clinic](#)' was set up at James Cook University (JCU) by one of their faculty members. It was advertised as being "used for student clinical placements" and to "accept cross-referrals from other allied health clinics on campus", because "complementary therapies were not offered as a nursing subject", and because this would help make students "aware of the range of interventions that could be used to treat patients". There is no scientific evidence to support the concept of energy healing.

FSM wrote to the Head, Nursing, Midwifery and Nutrition, raising our concerns that allowing the clinic to operate from JCU facilities could be logically interpreted as an *imprimatur* from a respected academic institution, and strongly urging her to have the university publicly distance itself from this health care fraud.

We received an immediate response notifying us that, after we brought the media information to her attention, a clarifying statement had been released to the media. "[JCU does not promote nor teach healing touch in its science-based nursing programs](#)" and no referral pathways exist from any JCU clinics to the clinic. JCU does not schedule placements at this clinic. The university is currently reviewing the processes surrounding staff engagement with the media and all links to any inaccurate material had been removed.

Since then, JCU has sought to distance itself from 'healing touch' therapies and [the clinic has shut down](#). FSM has congratulated James Cook University for dissociating the university from this pseudo-science.



## Swinburne University of Technology



A [Current Affair \(ACA\)](#) story, "ADHD breakthrough" targeted parents of children diagnosed with ADHD. ACA claimed that [Blackmores Lyprinol](#), as a natural treatment that "costs less than \$20 a week", appeared to be effective for attention deficit hyperactivity disorder (ADHD).

However, the results of the [well-conducted Swinburne study](#) referred to by ACA "did not support the hypothesis that PCSO-524<sup>®</sup> improves parental reports of hyperactivity, inattention and impulsivity in children ages 6 to 14 years over placebo".

[Media Watch followed up on the ACA 'advertorial'](#) and cited the Pharmalink Media Release, which inappropriately quoted Swinburne as saying that the study was "very exciting". The media release also claimed that there were "tangible improvement in kids with behaviour, attention and hyperactivity". The Swinburne study was funded by Pharmalink Pty Ltd, the Cayman Islands company which licenses Blackmores to manufacture Lyprinol - not mentioned by ACA.



Prof Jon Jureidini

FSM appreciates the statements by Professor Jon Jureidini, a child psychiatrist at the Women's and Children's Hospital, Adelaide, that the claims "couldn't be further from the truth" and that using Lyprinol would be wasting parents' "money on so many levels".



## University of New South Wales



“Behavioural Optometry” claims that most vision disorders are the result of learned or environmental factors and can be corrected through eye training. These are non-evidence based claims. The University of New South Wales (UNSW) has been running a Masters unit in Behavioural Optometry, for more than 20 years.

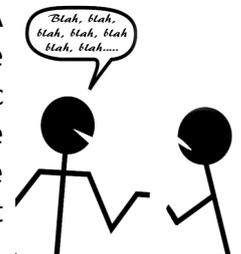
According to the Australasian College of Behavioural Optometrists (ACBO), the subject is not being offered this year because of “UNSW staffing issues”. This follows a decision by the Lady Cilento Children's Hospital (LCCH) to refuse ACBO members (“due to their provision and advertising of behavioural optometry services”) from participating in their ongoing community follow-up program, in which optometrists monitor children who are discharged from LCCH eye clinic.

## AUSTRALIA’S FAILING THERAPEUTIC GOODS ADMINISTRATION



The Therapeutic Goods Administration (TGA) is the authority responsible for regulating medicines, medical devices, blood, and tissues. The Therapeutic Goods Administration Complaints Resolution Panel (CRP) receives, considers and determines complaints about advertisements directed to consumers in TV, radio, the internet, newspapers, magazines, displays (except inside individual shops) and cinematographic film. Depending on where it was advertised, complaints about a therapeutic product can be made to CRP, Complementary Medicines Australia, Australian Self Medication Industry or the TGA.

The CRP either provide reasons as to why the complaint is not dealt with, (e.g. misguided, referred to the TGA) or responds by allocating a complaint number and providing a final determination (albeit often slowly, due to lack of resources). The TGA merely notes, “Investigations into complaints are prioritised based on the level of risk posed to consumers” and “the TGA is unable to disclose specific details of the investigation to you due to confidentiality reasons”. These statements can be interpreted as, “we’ll disregard these complaints as we have much more important things to do” and “you’ll never know that we’ve done nothing because we don’t have to tell you anything”!



In addition, complaints sent to the TGA by the CRP (for example, because they lack a registration [ARTG] number) also disappear into a similar ‘black hole’.

This lack of transparency fuels the perception that the TGA is more concerned with protecting industry rather than consumers, and does not engender confidence in the TGA’s ability to take over the entire advertising complaint system.

### Advertising Compliance Unit

While the Advertising Compliance Unit is taking some steps in the immediate future to improve transparency of TGA outcomes concerning the CRP’s recommendations to the Secretary to order particular advertisers to comply (publication is expected to start early next month), we are also shifting our focus to ensuring that arrangements under a new advertising complaints handling system (whether administered by the TGA or by an external body) will have inherent transparency and make it easier for consumers to lodge and monitor their advertising complaints.

Several concerns about the response to complaints sent to the TGA have been recently made to Adjunct Prof John Skerritt, Deputy Secretary for Health Products Regulation, Department of Health.



The concerns and the response received follow:

1. **Concern:** Complaints sent to the TGA's "[Report a perceived breach or questionable practices](#)" did not receive an acknowledgment.

**TGA Response:** We have now implemented an immediate automated response in the submission of the report "perceived breach or questionable practices" form so it should now work the same way as the response from [tga.advertising@tga.gov.au](mailto:tga.advertising@tga.gov.au).



2. **Concern:** The standard formal response by the TGA to complaints sent to [tga.advertising@tga.gov.au](mailto:tga.advertising@tga.gov.au) is most off-putting compared to that of the CRP.

**TGA Response:** We acknowledge that transparency around advertising complaints can be improved – and this is part of the planned implementation of reforms to therapeutic goods advertising in the response to the Medicines and Medical Devices Regulation Review.

## Veterinary Science News

### News from the UK

On 26 January 2017, the [Royal College of Veterinary Surgeons \(RCVS\)](#) announced that they were reviewing their current position and guidance on complementary medicines following a meeting of the Standards Committee. The College stated that its "current position statement and guidance regarding complementary medicines will both be reviewed".



The review had been announced in November 2016 following [comments](#) by the Advertising Standards Authority (UK) regarding its guidance on claims made in marketing materials for homeopathic treatments.

Homeopathy has been the subject of [ongoing debate](#), with a petition launched on Change.org calling for it to be blacklisted, so that such treatments can no longer be prescribed by veterinary surgeons. The petition closed with 3,364 supporters.

## Complementary and Alternative Medicine

### Committee of Advertising Practice (UK)

The Committee of Advertising Practice (CAP) write and maintain the UK Advertising Codes, which are administered by their Advertising Standards Authority (ASA). One of functions of the CAP is to provide advice to advertisers, who are required to hold robust evidence to support efficacy claims. Approval by the CAP implies that large-scale double-blind clinical trials have found evidence of the effectiveness of the intervention advertised.



CAP has recently issued guidance on both [acupuncture](#) and [osteopathy](#) and we understand that they are currently reviewing chiropractic.

### Acupuncture



WHO

In 1996, a report written by Chinese clinicians was published by the World Health Organization (WHO). It claimed that acupuncture was [clinically proven to be effective](#) for a range of disorders and diseases and that it was effective for over 90 illnesses. In 2003, WHO re-visited the effectiveness of acupuncture, giving the report a "[ringing endorsement](#)". Their uncritical, outdated document, which includes numerous studies more than four decades old, is referred to by thousands of industry associations, university students, private health funds and thousands of practitioner websites as 'evidence'.



Practitioners claim that, based on this report, acupuncture can be used for many serious illnesses, including [HIV](#), depression, dysentery, osteoarthritis, [polio](#), schizophrenia and whooping cough.



FSM has documented [over 1,100 websites](#) in Australia, Canada, South Africa, the UK and NZ which, through their associations, refer, directly or indirectly, that continue to refer to the discredited WHO report.

In 2013, the UK Committee on Advertising Practice (CAP) for (Health: Acupuncture) issued guidance rejecting the majority of claims made in the WHO report, but stating "[acupuncture could be effective in pain relief](#)". In November 2016, the National Institute for Health and Care Excellence (NICE) guideline [NG59] "[On Low back pain and sciatica in over 16s: assessment and management](#)" recommended that health practitioners "do not offer acupuncture for managing non-specific low back pain with or without sciatica".

Following further correspondence with Dr Ed Kelley, Office for Service Delivery and Safety, WHO, the **link to the 1996 report has been removed** and we were given permission to issue the following statement:

"The World Health Organisation's 'Office for Service Delivery and Safety' is currently reviewing the scientific evidence that addresses the efficacy of Complementary and Traditional Chinese Medicine (TCM) including Acupuncture. The Office has reported that: 'WHO is working forward on a detailed approach to building and reviewing evidence in TCM. For us this is the important focus'."

With no strong studies to support claims for pain relief, FSM believes that guidance for acupuncturists should be amended to remove claims that this is a safe and effective intervention for patients with any condition. FSM has [written a white paper](#) on acupuncture.

## Traditional Chinese Medicine



FSM has documented [over 1,000 Australian websites](#) making false and misleading claims relating to Traditional Chinese Medicine (TCM) and Acupuncture. These include referring to the deleted (February 2017) World Health Organization (WHO) report (see above), which claimed that acupuncture was proven to be effective for over 90 disorders and diseases, websites targeting pregnant women and their foetuses, and websites claiming that TCM is either 'safe' and/or 'effective'.

## Chiropractic

The peak body representing chiropractors, the Chiropractors' Association of Australia (CAA), has rejected any links with the Vaccination-sceptics Network (AVN). In a media release, they requested that AVN remove links to the CAA National website immediately. The CAA policy on vaccination [is publicly available](#).



## Osteopathy



In December 2016, the Advertising Standards Authority (UK) teamed up with the General Osteopathic Council to send new osteopathy [guidance](#) relating to marketing claims for pregnant women, children and babies, providing examples of what kind of claims can, and can't, be made for these patient groups.



## Homeopathy



### ***Australian Therapeutic Goods Administration Complaints Resolution Panel***

Homeopathy, which dates back to the 1700s, is based on the unscientific notion that diseases can be treated by administering progressively diluted doses of substances that supposedly produce similar symptoms when provided in stronger doses to healthy people.

Many homeopathic products are diluted to such an extent that they no longer contain even a single molecule of the initial substance. For the vast majority of over-the-counter (OTC) homeopathic drugs, the policy statement notes, “the case for efficacy is based solely on traditional homeopathic theories and there are no valid studies using current scientific methods showing the product’s efficacy.” As such, the marketing claims for these products are likely to be misleading, and in violation of the FTC Act.

In 2015, the National Health and Medical Research Council (NHMRC) [published their review](#) of the scientific evidence for the effectiveness of homeopathy in treating a variety of clinical conditions. The review found “no good quality, well-designed studies with enough participants to support the idea that homeopathy works better than a placebo, or causes health improvements equal to those of another treatment”.

The [new representative](#) on the Therapeutic Good Administration Complaints Resolution Panel, representing the Australian Traditional Medicine Society, created most of the retail and practitioner homeopathic product ranges for [Brauer Natural Medicines](#).

Will he remove himself from the panel when he has perceived conflicts of interest?

### ***Australian Federal Trade Commission Issues Homeopathic Advertising Guidelines***

On 15 November 2016, the Federal Trade Commission (FTC) announced [a new policy](#) regarding homeopathic product advertising.

The FTC will hold efficacy and safety claims for OTC homeopathic drugs to the same standard as other products making similar claims. Companies must have competent and reliable scientific evidence for health-related claims, including claims that a product can treat specific conditions. The statement also describes the level of scientific evidence that the Commission requires for such claims.



## AUSTRALIAN HEALTH PRACTITIONER REGULATION AGENCY

### Chiropractic



[In a landmark decision](#), a NSW chiropractor has been convicted under Health Practitioner Regulation National Law of unlawfully advertising a regulated health service and using testimonials. The chiropractor was fined \$29,500 after pleading guilty to 13 charges filed by the Australian Health Practitioner Regulation Agency.(AHPRA). The AHPRA CEO stated, “today’s conviction is a landmark ruling. Our purpose, working closely with the Chiropractic Board of Australia, is to protect the public. This shows that we will take action and that people breaking the law will be held to account”.

FSM is not opposed to evidence-based musculoskeletal therapy for mechanical conditions.



## Nursing and Midwifery Board of Australia

FSM wrote to Dr Lynette Cusack, RN, Chair, Nursing and Midwifery Board of Australia (NMBA), to thank her and her Board for their October 2016 ['Position statement on nurses, midwives and vaccination'](#).

The NMBA not only "expects all registered nurses, enrolled nurses and midwives to use the best available evidence in making practice decisions", but it encourages anyone with concerns about a nurse or midwife to make a complaint to AHPRA. FSM believes that position statements, such as this, advances Australia's commitment to evidence-based health care.

## Osteopathy Board of Australia

In October 2016, concerned about [hundreds of osteopaths](#) targeting babies and children,



FSM met with the Osteopathy Board of Australia (OBA). Common claims on the websites which we provided include claims for osteopathy for 'glue ear' and recurrent ear infections which might lead to deafness, asthma and allergies, recurrent chest infections, sinus problems, recurrent tonsillitis, learning and behavioural difficulties 'growing pains', bed wetting, postural problems, assisting in prevention of curvature of the spine, autism and Down's syndrome.

At the meeting, we briefly discussed the need to examine pseudoscientific techniques commonly offered by osteopaths, specifically 'Osteopathy of the Cranial Fields' (OCF) and 'Visceral Manipulation' (VM). While we agreed that the fact that science has not validated a hypothesis doesn't mean that the hypothesis is without merit, we pointed out that this does not apply when credible scientific evaluation has already established that the premise associated with the proposition is untenable.

In a follow-up letter to the Chair, we appended learned opinions stating that OCF represents anti-science and should not be utilised in osteopathic practices. As we plan to discuss this matter in detail at our next face-to-face meeting, we asked the Chair for comments on OCF and VM, to help us better prepare for future discussions.

On 28 March 2017, the Osteopathy Board issued a ["position statement on paediatric care"](#).

## New Victorian Complaints Commissioner



FSM documented more than [100 Victorian acupuncture](#) websites targeting babies and pregnant women. Obstetrician and gynaecologist, Dr Graeme Dennerstein, Professor John Dwyer and Dr Ken Harvey will be meeting Karen Cusack, the new Victorian Complaints Commissioner, to discuss ways to deal with alternative practitioners offering non-evidence-based interventions for obstetric, neonatal and paediatric interventions for a variety of minor and major medical conditions.

## COAG meeting

Even though an FSM-prompted [advertising statement](#) from the Chiropractic Board of Australia has restricted false and misleading claims targeting babies and children on websites and other public places, practitioners can still target young families in their clinic and verbally offer and charge for non-evidence-based interventions. Professor John Dwyer and Dr Ken Harvey will be meeting with Jill Hennessy to discuss the concept "if you cannot advertise it, then you cannot do it in your clinic".



## PHARMACY NEWS

### TGA Consultation *The Regulatory Framework for Advertising Therapeutic Goods*



FSM did not submit their own comments, but endorsed the [consultation submission](#) prepared by Dr Ken Harvey, and Monash University students, Sasha Hall and Tiana Moutafis.

"The Therapeutic Goods Advertising Code 2015 is a legislative instrument made by the Minister under the Act. Its objects are to ensure that the marketing and advertising of therapeutic goods to consumers is conducted in a manner that promotes the quality use of therapeutic goods, is socially responsible and does not mislead or deceive the consumer.

The Code sets out principles and minimum requirements for the acceptable and unacceptable content and effects of advertisements for therapeutic goods directed to consumers. It is an offence under the Act if a person publishes or broadcasts an advertisement about therapeutic goods that does not comply with the Code.

"Many amendments to the Code have been on hold until the outcomes of the Review were known. It is proposed that these amendments, including those designed to address the parity of the Code in relation to medicines and medical devices, will now proceed in consultation with the current Code Council. The new Code is expected to be in force before (or at the same time as) other proposed changes to the advertising framework and will be the subject of separate consultation.

"In improving the Code, considerations will include:

- The adequacy of the current definitions of 'prohibited' and 'restricted' representation, particularly in the light of new diagnostic techniques (such as those involving direct-to-consumer genetic testing) and the plan to allow enhanced efficacy claims for certain complementary medicines (r.39).
- Referring to obesity a restricted representation.
- Referring to a "serious medical intervention" a restricted representation.
- Amending the section on "scientific information" including ensuring that any scientific information in an advertisement is identifiable and accessible to consumers.
- The use of testimonials in advertisements.
- The offering of free samples of therapeutic goods as part of an advertisement.

In addition to these specific considerations, the code will be re-drafted with a view to providing more objective tests for breaches of the code, particularly given the possible introduction of strict liability offences for breaches of the code."

FSM congratulates Sasha and Tiana for their considerable effort.





## A Special Report from Professor Edzard Ernst

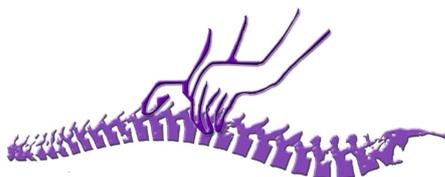
### Educating Chiro



At a recent conference in Montréal (October 2016), the WFC (World Federation of Chiropractic) and the ACC (Association of Chiropractic Colleges) reached a consensus on chiropractic education which they [published online \(page 14\)](#).

However, much about chiropractic is little more than a mixture between politically correct drivel and wishful thinking!

1. Some chiropractors believe that all or most human conditions are 'spine-related disorders'. We need a clear statement whether the WFC/ACC support or reject this notion and what conditions we are actually talking about.
2. Chiropractors claim to be 'evidence-informed'. I have come across this term before; it is used more and more by quacks of all types. It is clearly not synonymous with 'evidence-based', but aims at providing a veneer of respectability by creation an association with evidence-based medicine. In concrete terms, asthma, for instance, might, in the eyes of some chiropractors, be an evidence-informed indication for chiropractic. In other words, 'evidence-informed' is merely a carte blanche for promoting all sorts of nonsense.
3. Chiropractors claim to be making 'technical advances' - what are these?
4. Public trust is best cultivated by demonstrating that chiropractic is doing more good than harm; by itself, this point sounds a bit like public relations for maximising income. What is 'cultural authority' –is it chiropractic as a cult?
5. The phrase 'International portability' is used by chiropractors – nice term, but what does it mean?
6. Many chiropractors do not know what is meant by the term 'ethics', but they certainly know much about business!
7. Chiropractic educational curricula should reflect current evidence and high quality guidelines and be subjected to regular review to ensure that students are prepared to work in collaborative health care environments. Like those by the [National Institute for Health and Care Excellence](#) which no longer recommend chiropractic for back pain? No? They are not 'high quality'? I see, only those that recommend chiropractic fulfil this criterion!
8. Chiropractors claim to be leaders? Really? With their (largely ineffective) manipulations as the main contribution to the field? You have to be a chiropractor to find this realistic, I guess.
9. The evidence that has been emerging since many years is that chiropractic manipulations fail to generate more good than harm.
10. Critical thinking and chiropractic are a bit like fire and water.





If chiropractors truly want chiropractic educational curricula to “reflect current evidence”, they need to teach the following main tenets:

- \* Chiropractic manipulations have not been shown to be effective for any of the conditions they are currently used for.
- \* Other forms of treatment are invariably preferable.
- \* 'Subluxation', as defined by chiropractors, is a myth.
- \* Spine-related disorders, as taught in many chiropractic colleges, are a myth.
- \* 'Evidence-informed' is a term that has no meaning; the proper word is 'evidence-based' – and evidence-based chiropractic is a contradiction in terms.
- \* Finally, chiropractors need to be aware of the fact that any curriculum for future clinicians must include the core elements of critical assessment and medical ethics. The two combined would automatically discontinue the worst excesses of chiropractic abuse, such as the promotion of bogus claims or the financial exploitation of the public.

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