



Friends of Science in Medicine

Newsletter 24—03 April 2020

Thank you SO MUCH – all of you health care, civic and military workers.



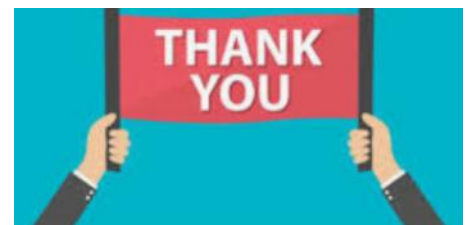
Whatever role you are performing, from cleaning hospital floors, all the way up the chain to the managers of our hospitals, we potential patients thank you.

To the local garbage collectors to our local councillors, trying to protect our communities, the police, ambulance crews and fire-fighters and the armed forces – our

heartfelt thanks.

The elderly and infirm, now confined to our homes, thank our home carers for helping us in so many ways, from personal care to shopping.

- * Thank you for putting your own health at risk to help us.
- * Thank you for being compassionate.
- * Thank you for everything you do.
- * In fact, thanks again for everything.



We wish you all a safe journey through this unprecedented Australian epidemic.

Our thoughts are with you for the months ahead.

All at Friends of Science in Medicine.



www.scienceinmedicine.org.au



scienceinmedicine@bigpond.com



'Follow' us on Twitter @FriendsofSciMed



'Like' our Facebook Page



PO Box 631, Morayfield, QLD, 4506

Inside this Issue:

TGA: Covid-19 advertising warning	2	Parliamentary Inquiry—allergies and anaphylaxis	8
AHPRA: Covid-19 advertising warning	3	FSM statement about the CSU appointment of Prof Jon Wardle	9
TCM for Covid-19?	4	FSM Executives in the media	10
The hygiene message goes viral	5	Nursing & CAM	11
Independent review: Therapeutic Goods Advertising	6	Recent publications by Friends	12
Veterinary Medicine and CAM	7	Edzard Ernst: The Australian 'Maurice Blackmore Chair of Naturopathic Medicine'	13



TGA issues warning about illegal advertising relating to COVID-19

Warning to consumers

As a consumer, it is important to be aware of false and misleading advertising. Unfortunately, some people are taking advantage of the current situation by advertising products that claim to prevent or cure COVID-19.



Claims being made include unregistered products that 'kill COVID-19', air purifiers that help fight the coronavirus, complementary medicines that prevent the virus, and a medical device that treats a number of serious diseases including COVID-19, HIV AIDs and cancer.

In Australia, the advertising of therapeutic goods is regulated by the TGA and must meet certain requirements.

If you are suspicious of the claims being made about a product, including those advertised as preventing or curing COVID-19, you can provide information to us via the online advertising complaint form.

Warning to advertisers

The TGA will take action in relation to the illegal advertising of therapeutic products. Advertisers are reminded that:

- * products which are represented to be for therapeutic use are regulated as therapeutic goods (with a few limited exceptions)
- * therapeutic goods must be included in the Australian Register of Therapeutic Goods, unless they are subject to an exemption, approval or authority under therapeutic goods legislation
- * criminal offence and civil penalty provisions apply to illegal advertising of therapeutic goods
- * the TGA is monitoring non-compliance, particularly in relation to the advertising of products that claim to prevent or cure COVID-19 and will take action in relation to any advertisements that do not meet the requirements, including those that seek to mislead consumers
- * this is in line with the previous warning about advertising and the novel coronavirus.

Consequences of breaking the law

The *Therapeutic Goods Act 1989* provides for a range of criminal offences, some of which are punishable by up to 5 years' imprisonment and attract fines of up to \$840,000 for an individual or \$4.2 million for a body corporate. Further, the legislation provides for civil penalties involving a penalty amount of up to \$1.05 million for an individual or \$10.5 million for a body corporate. In a civil penalty case brought by the TGA (*Secretary, Department of Health v Peptide Clinics Australia Pty Ltd* [2019] FCA 1107) the Federal Court of Australia awarded \$10 million in civil penalties in relation to contraventions of the advertising provisions under the Act.



AHPRA: False and misleading advertising on COVID-19

Warning to Registrants

AHPRA and National Boards recognise the vital role of registered health practitioners in treating and containing the COVID-19 emergency.

We recognise that registered health practitioners are working hard to keep people safe in a demanding and fast-changing environment.



BOOST YOUR IMMUNE SYSTEM- help avoid CoronaVirus

\$100 per 100g (for a 3-4 week preventative supply).

A consequence of the current situation is greater public awareness of an individual's own health and wellbeing, leading to many questions about treating and containing the disease. Accordingly, the public is likely to

seek reassurance and answers about COVID-19 from their trusted health professional.

While the vast majority of health practitioners are responding professionally to the COVID-19 emergency and focusing on providing safe care, Ahpra and National Boards are seeing some examples of false and misleading advertising on COVID-19.

During these challenging times, it is vital that health practitioners only provide information about COVID-19 that is scientifically accurate and from authoritative sources, such as a state, territory or Commonwealth health department or the World Health Organization (WHO). According to these authoritative sources, there is currently no cure or evidence-based treatment or therapy which prevents infection by COVID-19 and work is currently underway on a vaccine.

Other than sharing health information from authoritative sources, registered health practitioners

 **Adjustments can boost your immune system**

should not make advertising claims on preventing or protecting patients and health consumers from contracting COVID-19 or accelerating recovery from COVID-19. To do so involves risk to public safety and may be unlawful advertising. **For example, we are seeing some advertising claims that spinal adjustment/manipulation, acupuncture and some products confer or boost immunity or enhance recovery from COVID-19 when there is no acceptable evidence in support.**

Advertisers must be able to provide acceptable evidence of any claims made about treatments that benefit patients/health consumers. We will consider taking action against anyone found to be making false or misleading claims about COVID-19 in advertising. If the advertiser is a registered health practitioner, breaching advertising obligations is also a professional conduct matter which may result in disciplinary action, especially where advertising is clearly false, misleading or exploitative. There are also significant penalties for false and misleading advertising claims about therapeutic products under the Therapeutic Goods Act 1989.

Patients and health consumers should treat any advertising claims about COVID-19 cautiously and check authoritative sources for health information about COVID-19, such as state, territory and Commonwealth health departments.

As always, patients and health consumers should ask their practitioner for information to support any advertising claims before making decisions about treatment. Patients and health consumers should receive accurate and truthful messages so they can make the right choices about their health.

Information on advertising responsibilities, including use of acceptable evidence is available on the Ahpra website under [Advertising resources](#).



Traditional Chinese Medicines for COVID-19?

Australians can take comfort in these anxious days from [Article 8.25 our federal government's trade agreement with China](#), which mandates the promotion, in Australia, of Traditional Chinese Medicine (TCM). Regrettably, it is cold comfort.

[China's National Health Commission](#) has published a list of recommended interventions, including injections containing powdered bear bile. Does Australia have enough bears to satisfy our needs, or must we import it from China? Clever man, Mr Xi!

In truth, TCM relies on a non-scientific philosophy of disease, its diagnostic methods are unsafe, its evidence base is poor or non-existent, [there is a risk of toxicity](#) and there are [major welfare and ecological concerns](#). How safe are the poorly regulated ingredients? Toxic ingredients and the DNA of animals such as pangolins, have been detected in these 'medicines'.

In 2019, the World Health Organization (WHO) issued its updated [International Classification of Diseases](#), a highly influential document categorising and assigning codes to all illnesses. It is used by doctors in diagnosis and by insurance companies considering payment. [Traditional interventions have been included](#)! After the outbreak of COVID-19, WHO listed four ineffective precautions: "smoking, wearing multiple masks, taking antibiotics, and traditional herbal remedies".



"One step forward, but two backward." At [an editorial meeting](#) on March 4, WHO removed [traditional herbal remedies from the list](#).

The 'Acupuncture Evidence Project'—can it be used as 'evidence'?



The Cochrane Collaboration is the ['Gold Standard'](#) for evidence-based Medicine. More than [60 Cochrane reviews](#) have "failed to find robust evidence for clinically significant outcomes for acupuncture" – for *any* disease or disorder. A rigorously scientific, unbiased review of the evidence concluded that it was a theatrical placebo.

Registrants with the Chinese Medicine Board (appointed for three years by the Australian Health Workforce Ministerial Council and part of the Australian Health Practitioners Regulation Agency (AHPRA), which regulates evidence-based health professionals (both federal government responsibility), continue to refer to 'cherry-picked' positive references as 'evidence'.

However, according to AHPRA, the Acupuncture Evidence Project is *not* considered acceptable evidence to support allegations of false and misleading advertising. Advertising claims made by registrants are assessed against the advertising compliance and enforcement strategy and their [acceptable evidence resources](#).

Although the Australian Acupuncture & Chinese Medicine Association (AACMA) has published a disclaimer ([acupuncture evidence project page](#)) warning practitioners about using the findings of the project to make claims in advertising, many members' websites continue to do so.



According to the 'unmentionable' trade pact we have with China, our otherwise rational (!) government is compelled to promote this nonsense.



The hygiene message goes viral

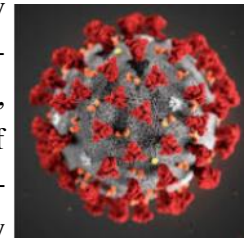
‘Finger-licking good’ in the age of COVID-19

Faced with the now world-wide pandemic of COVID-19, health officials are urging everyone to take hygienic measures such as washing hands, sneezing into elbows and more, and these are frequently printed in whatever newspapers still survive. Being of a certain age, I can recall when these simple measures were expected as normal behaviour anyway, but perhaps they were better observed when diseases like polio were terrifying our parents. With no vaccine then available, hygiene was deemed important.

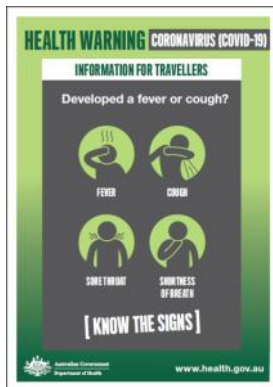


PERSONAL HYGIENE

Hygiene needs a refresher course now. Surveys have shown that, even among doctors and health workers, washing hands is not as well observed as it might be. We’ve all met those who assure us that they are ‘no longer infectious’ as they sniff and sneeze their way through our workplace? How would they know? During the great plague in Europe, shopkeepers made customers drop their coins into jars of vinegar. With no knowledge of microbes, their precaution seems pretty prescient now, but despite current analyses of what we leave on banknotes showing *E coli* from human faeces to be a frequent deposit, most of us think nothing of handing over a banknote to buy lunch and then eating it with that same hand.



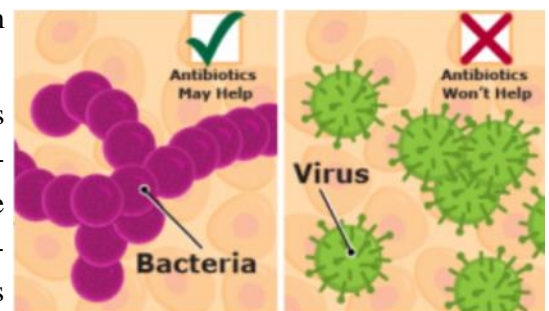
Coronavirus



Hygiene can be least observed where you might most expect it to be strong. I would strongly advise against perusing magazines offered in waiting rooms. You will often see a patient flicking through one, repeatedly licking their forefinger to turn each page. Given that countless others have done so before them, you could hardly invent a better method of repeatedly transferring saliva from numerous ill people to your own mouth while at the same time adding your own contribution to the microbial cauldron on each page. It is also pretty silly to lick your fingers in a waiting room after gripping the door handle, reception counter, chair arms and more.

The hygiene messages are welcome, but they are likely to be as effective as DRIVE SAFELY and BE BUSHFIRE READY – well intentioned but reaching few of the people who need to heed them and ignored or not understood by many of the rest. People seem to have forgotten about the germ theory of disease or, perhaps, have never been taught it. It is not helped by the relentless description of ‘superbugs’ by scientists when they mean ‘superbacteria’.

One of the features of growing antibiotic resistance is that people insist on antibiotics for colds and other ailments that are viral in nature. Antibiotics cannot tackle viral diseases, but many people have no idea of the difference between viruses and bacteria and the ubiquitous term ‘superbug’ does nothing to enlighten them.



Bacteria Vs Viruses

Professor Rob Morrison, Foundation Vice President Friends of Science in Medicine



Independent review: Therapeutic goods advertising

In February 2018, the Minister for Health, the Hon Greg Hunt MP, promised an independent review by 2020 of the impact of the advertising measures in the Therapeutic Goods Amendment (2017 Measures No.1) Act 2018.

[Ms Rosemary Sinclair AM](#), in association with [Protiviti](#) has now commenced this [review of advertising reforms](#). Ms Sinclair attended the 20 Feb 2020 meeting of the Therapeutic Goods Advertising Code where (on behalf of Choice) I [presented](#) the following concerns about the new advertising system .

- * **The classification of complaints**, especially the high proportion classified as ‘low priority’. The TGA’s view is that that low priority complaints have not breached the Act and Code. Despite detailed representations of specific breaches of the Act, it closes these cases with a ‘regulatory obligation letter’ stating that no further action will be taken.
- * **Numerous unresolved complaints**, dating back to July 2018, with an ever-increasing backlog. For example, concerning weight loss, hangover, homeopathic and other ‘traditional’ products, exploitative medical devices, and products at the food-medicine interface, especially dangerous sports ‘supplements’.
- * **Frequent, ongoing Code breaches unaddressed**, for example:
 - * Failure of the industry to keep up-to-date with new studies which clearly invalidate older ones, eg omega-3 for ‘heart health’, glucosamine for osteoarthritis, *ginkgo biloba* for mental enhancement.
 - * Failure to recognise newly restricted representations in permitted indications, such as saw palmetto for benign prostatic hypertrophy.
- * **KPIs** which relate to process (time to close with a ‘regulatory obligation letter’), not according to compliance.
- * **Ineffective sanctions and penalties**. For example:
 - * The TGA recently had a [\\$10 million fine awarded by the Federal Court](#) against Peptide Clinics Pty Ltd for breaches of advertising regulations, including advertising prescription-only medicines to the public. However, the company went into liquidation months earlier and did not pay. Similar complaints have yet to be addressed.
 - * [InSkin Cosmedics Group Pty Ltd](#) paid penalties of \$37,800 in regard to the alleged supply and advertising of the Dermalpen 4, a medical device not included on the Australian Register of Therapeutic Goods. To date, this device (still lacking an ARTG number) continues to be advertised by numerous clinics.
- * **Additional loss of consumer protection** that will result from the removal of therapeutic goods advertising pre approvals from July 1, 2020 (outside the scope of the Review).
- * **Problems with TGACC meetings**:
 - * Voluminous agenda arriving late, leaving little time for detailed consideration.
 - * Mainly addressed by TGA staff, with little time for discussion.
 - * Not a forum which makes use of its members’ experience and expertise.

See also:

- * [Civil Society Public Forum on Therapeutic Goods Bill](#)

Dr Ken Harvey, President, FSM



Veterinary Medicine and CAM

Column by Tanya Stephens

Last year the World Health Organization, pointing to a 30% increase in measles worldwide, included ‘vaccine hesitancy’ among its 10 biggest threats to global health. Fake news by vaccination deniers on social media has undoubtedly had an impact. Unfortunately, pet and horse owners, bombarded by a flourishing ‘holistic’ animal care market, are sucked into this space.



Registered veterinarians are justifiably proud of their record in research, in the development of vaccines and in preventative health. Because the concept of preventative medicine and herd immunity is second nature to us, the anti-vax movement is worrying. *Tanya Stephens* Last December, Queensland ‘anti-vaxx’ campaigners targeted family pets through their Facebook page. What is particularly worrying, with Hendra virus life-threatening to humans as well as to horses, is their questioning the need for Hendra virus vaccination.

We all know that herd immunity is essential in minimising the spread of infectious diseases, but it’s not just the anti-vaxxers our vets have to contend with. Vets have been unjustly accused of pushing unnecessary yearly vaccination of pets as a way of boosting their incomes. Because of cost, vet visits are diminishing. Vaccination is often tied in with an animal going to boarding kennels, allowing the owner to travel. With boarding kennels now empty because of Covid 19, people working from home are increasingly out and about with their dogs – in parks! A great way to spread this virus.

The nasty infectious diseases of pets prevalent when I graduated have largely disappeared because of vaccination. Canine distemper, infectious hepatitis, and parvovirus (a virus similar to feline panleukopenia which emerged in 1978) and feline panleukopenia are now uncommon. However, diseases re-appear; after a 40-year absence, feline panleukopenia reappeared out of the blue in Sydney a few years ago.

With little financial support for research into the prevalence of infections in pets, we don’t know how long immunity lasts after vaccination. This presents an ethical dilemma for vets accused of over-vaccinating – but at least vaccination is harmless.

By comparison, anti-vaxxers are dangerous. They peddle the myth that vaccination ‘destabilises the immune system’, causes chronic ill-health, causes the increasing incidence of behavioural problems – and even autism – in dogs. Homeopathic nosodes are “safe and effective”. An ‘holistic’ veterinary practice website states “it is now being recognised that veterinarians should aim to reduce the vaccine load on individual animals to minimise the risk of adverse reactions to the products” and “vaccine boosters can overstimulate the immune system and increase the likelihood of side effects”. Peddling false statements such as these are likely to strike fear into scientifically illiterate pet owners.

Antibody titre testing is recommended by ‘holistic’ vets to determine immunity – to see if vaccination is necessary. However, the science supporting titre testing is not well established, doesn’t test cellular immunity and people forget to re-test, potentially leading to a pool of unvaccinated pets.

As with many vets of my generation, the memory of euthanasing dogs with distemper, of cats dropping dead with feline panleukopenia and of veterinary hospitals full of dogs with severe diarrhoea has led to our exhibiting some cognitive bias and, perhaps, some over-vaccinating. Many of us would feel that the extremely low incidence of adverse effects justifies a quick low-impact vaccination over multiple costly blood tests hands down.

Falling vaccination rates of pets and horses would have significant long-term health and welfare impacts. This would be a good time to quarantine anti-vaxxers!

Tanya Stephens, BVSc (USyd) MSc IAWEL (Edin) MANZCVS (Animal Welfare).



Parliamentary Inquiry—allergies and anaphylaxis

Following a referral on 27 August 2019 from the Minister for Health, The Hon Greg Hunt MP, [a Committee was set up to inquire into and report on allergies and anaphylaxis](#). FSM, an ‘interested party’ made a submission.

In December, the House of Representatives Standing Committee for Health, Aged Care and Sport invited FSM to give witness at a Public Hearing. On 18 February, our CEO, Loretta Marron, attended.

FSM’s submission had requested that the Committee direct the Therapeutic Goods Administration (TGA) to cancel two ‘Bioresonance’ devices, one of which had been listed for more than a decade. These ‘low risk’ devices had been registered as ‘biofeedback’ devices. ‘Bioresonance’ is an ‘energy medicine’, claiming to be based on acupuncture, homeopathy and ‘quantum physics’.

In August 2019, the TGA had [published a warning on Bioresonance](#), closing the more than 200 complaints submitted by FSM in September/October 2018, relating to advertising which breached the Therapeutic Goods Act.

The TGA engaged a “credible Australian scientific organisation” to review the evidence. [By February 2020, all devices had been deleted from the Register](#).

FSM had been told that the TGA intended to commence an ‘education campaign’, including communicating with relevant federal regulators, state/territory regulators, peak bodies representing health practitioners (including the [Australian Traditional Medicine Society \(ATMS\)](#)), and sponsors and practitioners who advertise.

In January 2020, the TGA confirmed that an education campaign had commenced and that they were assessing its impact and how it might need to evolve to implement the findings of the investigation into the evidence. A preliminary assessment had indicated that the campaign had had some impact on advertising compliance. They also mentioned that, while there will not be a report on the impact of the educational campaign, the TGA will publish a further update on bioresonance compliance once the final result of the 2019/2020 cancellations was known.

As our original submission was now redundant, FSM made a second submission which included the following:

1. In support of the ‘Education Campaign’, FSM requested that the Inquiry issue a specific *direction* to both ATMS and the Australian Natural Therapies Association, **both being organisations which profess to adhere to “the highest ideals of professionalism”**. These bodies should be **instructed** to work with the [Australasian Society of Clinical Immunology and Allergy \(ASCIA\)](#) to determine the scope of the interventions which ATMS and [Australian Natural Therapists Association \(ANTA\)](#) members are and are not permitted to do and which they are and are not permitted to advertise for people concerned about possible allergies.
2. FSM requests that the Inquiry direct the Chinese Medicine Board and the Australian Health Practitioners Regulation Agency to work with ASCIA to determine the scope of the interventions which Chinese Medicine practitioners are and are not permitted to do and advertise for people concerned about possible allergies.

FSM will keep you updated on any action after the Inquiry makes its findings public.

Nicotine Addiction
Allergies and Intolerances Acute and chronic allergy related disorders such as food allergy, hay fever, skin rashes and respiratory problems
Chemical Toxicity or Sensitivity
Heavy Metal Toxicity
Radiation For example from mobile phone use, frequent air travel (cosmic radiation), or exposure to harmful electro magnetic fields (including household appliances)
Digestive Complaints and Irritable Bowel Syndrome (IBS)
Viral and Bacterial Infections
Candida
Cold Sores
Headaches and Migraines
Muscle Aches and Pains
Hormone Related Conditions
Behavioural or Emotional Problems Caused by the above conditions or other disturbances in normal oscillation patterns

Claims for the BICOM device



FSM statement about the appointment of Professor Jon Wardle to SCU

Friends of Science in Medicine (FSM) President, Assoc Professor Ken Harvey MB BS (Melb), FRCPA, AM congratulates Professor Jon Wardle, nurse and naturopath, with postgraduate qualifications in public health, law and health economics, on being appointed to Southern Cross University's (SCU) *Maurice Blackmore Chair of Naturopathic Medicine* in Lismore.



Director of the new National Centre for Naturopathic Medicine Professor Jon Wardle

Professor Wardle has also been appointed as Foundation Director of the National Centre for Naturopathic Medicine (NCNM) funded with \$10 Million from the Blackmore Foundation set up to sponsor research into 'complementary medicine'.

Vice Chancellor, Professor Adam Shoemaker BA (Hons), PhD (ANU), researcher in Indigenous literature and culture, said the benefits of basing the NCNM at Southern Cross were enormous, 'Being in a region like the Northern Rivers of New South Wales means we have brilliant local networks in this field. We are also supported by a local community who, like the University, are really receptive to trying new things in order to create a healthier future'.

Professor Harvey comments, 'Professor Wardle certainly has challenges ahead. The Northern Rivers region is the anti-vax capital of Australia and some naturopaths advise against vaccination. Degree courses in naturopathy such as the Torrens Bachelor of Health Science (Naturopathy) degree, include studies of Homeopathy, Iridology and Flower Essence therapy. None have scientific evidence of efficacy'.

FSM has long argued that health care should be based on scientifically sound research, published in peer-reviewed journals of accepted standing. FSM is equally concerned about medical practitioners offering unproven and often exploitative treatments as it is about complementary medicine practitioners.

Professor Harvey said, 'some naturopaths practicing in Lismore, associated with SCU, work at clinics that use unverified laboratory tests to make dubious diagnoses and recommend treatment programs that lack evidence of efficacy'.

Professor Harvey (and FSM) conclude that there is an urgent need for evidence-based science to be applied to naturopathy. They trust that Professor Wardle will emulate Professor Edzard Ernst, Foundation Professor of Complementary Medicine at Exeter University, by applying accepted scientific standards to the evaluation of naturopathic interventions.

The March 24 opening of the NCNM in Lismore featured a panel discussion on the future of health care with guest speakers: Professor Kerry Phelps AM, former President of the Australasian Integrative Medicine Association, Marcus Blackmore AM, naturopath and Executive Director of Blackmores Ltd, which markets vitamin and herbal products, and Professor Jon Wardle.

FSM hopes that the panel discussed some of the issues raised above.





FSM Executives in the Media

Coronavirus, IV Drips and Opioids are some of the topics the FSM Executive was interviewed about or published about since the last newsletter.

- * [Should Australia be enforcing a UK-style lockdown?](#)
- * [Public health experts back stronger lockdowns to combat coronavirus](#)
- * [Health experts calls for mass testing to ascertain coronavirus spread](#)
- * [Coronavirus Australia: Hospitals swamped by thousands of COVID-19 cases within a MONTH, experts say](#)
- * [Hunt on for fans of city's orchestra after woman tests positive for coronavirus](#)
- * [Coronavirus: Hospitals to be swamped 'within weeks'](#)
- * [Coronavirus cure: What can you do to ease symptoms? Three remedies to consider](#)
- * [Coronavirus cure: Could herbal Chinese medicine help fight the deadly virus](#)
- * [Coronavirus clusters will spring up across Australia and hundreds of people are ALREADY infected but don't know it, top virus doctor warns - and the worst is yet to come](#)
- * [Aussie trapped in coronavirus epicentre in China says he's SAFER in Wuhan than he would be back home - and says Scott Morrison's government should adopt extreme measures](#)
- * [Coronavirus panic buyers spend their Saturday queueing up outside supermarkets](#)
- * [JOHN DWYER. Understanding the public health imperatives required to minimise infections with the Corona virus. \(Part One\)](#)
- * [JOHN DWYER. Understanding the public health imperatives required to minimise infection with the Corona virus. \(Part Two\)](#)
- * [Aussie doctor pushes for free flu vaccine](#)
- * [Coronavirus experts call for random blood testing to slow the spread](#)
- * [IV Infusions under fire](#)
- * [Nine ACA IV drip health warning \(video clip\)](#)
- * [Pharmacist Shadi Kazeme under fire over intravenous vitamin drips](#)
- * [Science or Snake Oil: do hangover cures actually work?](#)
- * [Banned for 12 months](#)
- * [Harvey refutes CMA claims](#)
- * [JOHN DWYER. The Opioid crisis should focus attention on the inadequacy of Primary Care in Australia.](#)
- * [JOHN DWYER. American's desperate thirst for affordable health care might just ensure they don't get it!](#)
- * [Multiple medications fail to meet safety standards](#)

SPOTTERS WANTED!

Want to be a 'Public Health Activist'? The 'Whack-a-mole (WAM)' project needs your help! Developing university students' skills in critical thinking, research and in understanding our regulatory system, this project needs to be provided with more advertisements that may be making questionable therapeutic claims.

If you see any therapeutic goods or services making outrageous claims - don't get angry, get emailing! Send the links or copies of advertisements (and where and when they were published) to our CEO, at scienceinmedicine@bigpond.com





Nursing and CAM

Column by Tara de Koning

IV Vitamins– magical cure or storm in a container of water?



Tara De Koning

Australians are increasingly undergoing vitamin infusions. These contain vitamins, minerals and other substances. Are they any help?

IV therapy has been used [by the doctors for decades](#) – for hydration and to administer essential nutrients for gut absorption problems, or difficulty eating or drinking after surgery.

The growing commercialisation is worrying. [Celebrities promote them](#) on social media, [claiming](#) that they combat hangovers, remove ‘toxins’, remove fat, are anti-ageing, prevent colds and upper respiratory tract infections, boost immunity, relieve fatigue, provide mental clarity and improve memory.

Amongst several Australian clinics, [Drip IV Australia](#) operates in Sydney, Melbourne, Brisbane and the Gold Coast. [One session](#) can take 30-90 minutes and can cost from \$80 to \$1,000. Some clinics [promote this](#) for serious conditions like acute asthma attacks, chronic sinusitis, depression and heart disease. [Others claim](#) that they can benefit cancer, Parkinson’s disease, macular degeneration and the pain of ‘fibromyalgia’.

[Dr Ken Harvey](#), Associate Professor of Public Health and Preventive Medicine at Monash University states “...the claims made are false, misleading and deceptive; most cannot be substantiated; they create an unreasonable expectation of benefit and they encourage the unnecessary use of health services.”

He cautions that involved health professionals, like nurses, could be breaching their respective Codes of Conduct, and that the companies concerned could be in breach of s.133 of the National Law.

[Some of these businesses](#) include lounges, where people kick back in comfy chairs while hooked up, watch Netflix and have tea. Others offer a mobile service to customers’ homes, weddings, corporate events and bucks’ and hens’ parties.

However, [few clinical studies](#) show any health benefit. One [review](#), of "Myers' cocktail" (magnesium, calcium, vitamin C and a number of B vitamins) contains merely a collection of anecdotal evidence. Another [trial](#) explored these infusions in reducing symptoms of 34 people with ‘fibromyalgia’. No significant differences were shown between those who received it weekly for eight weeks and those who did not. The authors noted a strong placebo effect – people said their symptoms had improved after being injected with a ‘dummy’ cocktail. An minute [study](#) of seven ‘fibromyalgia’ patients, lacking a placebo group, showed only short-term improvement in symptoms.

[The risks far outweigh any claimed 'benefits'](#). In 2018, [model Kendall Jenner](#) was reportedly hospitalised after a bad reaction. [Potential risks](#) include fainting, bruising, blood clots and infection. People with [kidney disease](#) shouldn't have these infusions because they cannot quickly remove certain minerals from their bodies. For such people, too much potassium could cause a heart attack. People with high blood pressure or heart conditions risk fluid overload which can lead to heart failure, delayed wound healing, and impaired bowel function. If the infusion contains Vitamin A, an excess [can be toxic](#), causing nausea, liver damage or even death.

[For most people](#), the quantities of needed vitamins and minerals can be obtained by a well-balanced diet.



Tara de Koning has a Nurse Practitioner's Master's Degree and 18 years experience as a nurse. She has worked as a Medical Writer at NPS MedicineWise and is now working as a freelance Medical Writer.



RECENT RELEVANT PUBLICATIONS BY FRIENDS

Edzard Ernst

- * [Functional neurology – more chiro-quackery](#)
- * [Dry needling is useless for rehabilitation after shoulder surgery](#)
- * [Homeopathy “can play significant therapeutic roles in very serious diseases” ... a case-report that is deeply worrying](#)
- * [The risks of \(chiropractic\) spinal manipulative therapy in children under 10 years](#)

BMC: Alessandro R. Marcon, Blake Murdoch & Timothy Caulfield

- * [The “subluxation” issue: an analysis of chiropractic clinic websites](#)

Forbes: Steven Salzberg

- * [Coronavirus: There Are Better Things To Do Than Panic](#)
- * [How Anti-Vax Activists Use Conspiracy Theories To Spread Fear Of Vaccines](#)
- * [Would You Trust Your Child With This Anti-Vax Ex-Doctor?](#)

Policy Options Politiques: Tim Caulfield

- * [Misinformation, alternative medicine and the coronavirus](#)

Science-based Medicine

- * Steven Novella [Coronavirus Myths and Facts](#)
- * Harriet Hall [Pitfalls in Research: Why Studies Are More Often Wrong than Right](#)
- * David Gorski [Genetics and evolution in cancer](#)
- * Clay Jones [A Popular Class of Antibiotics May Increase Risk of Birth Defects](#)
- * Scott Gavura [Supplement vendors make unfounded cancer treatment claims](#)
- * Jann Bellamy [FDA warns public about exosome treatments](#)

Respectful Insolence (David Gorski)

- * [Children’s Health Defense: Ten lies about vaccines](#)
- * [Is medical error really the third most common cause of death in the US?](#)

Good Thinking Society (UK)

- * [For Schools: Teaching students that the world is flat... in the name of science](#)
- * [Leading retailers respond to widespread condemnation of Get Well Magazine](#)

Skeptical Raptor

- * [COVID-19 vaccine – updated guide to coronavirus vaccine development](#)
- * [Coronavirus homeopathic potions – here comes the quackery and woo](#)

Skeptical Inquirer

- * [But What Do I Know](#)
- * [A Test For Earlier Diagnosis Of Autism? Not Convincing](#)

The Question of Science Institute (IQC)

- * [Everything you need to know about acupuncture](#)
- * [Magical thinking and political despair](#)



A SPECIAL REPORT FROM EDZARD ERNST

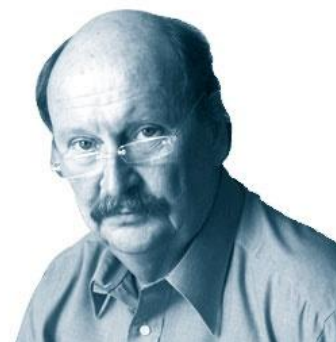
The Australian 'Maurice Blackmore Chair of Naturopathic Medicine'

A new appointment in the realm of so-called alternative medicine (SCAM) has [just been announced](#).

Sounds exciting, but is Wardle up to the job?

Judging from his publication record, Wardle is certainly a [naturopath through and through](#). He has published lots of papers; as far as I can see most of them are [surveys](#) of some sort or another. Many leave me somewhat bewildered.

Excerpts from two publications must suffice:



Edzard Ernst

No 1

Objectives: To explore the recommendations of naturopathic medicine for the management of endometriosis, dysmenorrhea, and menorrhagia, drawing on traditional and contemporary sources.

Conclusions: The findings of this article provide insights into the documented historical and contemporary treatments within naturopathic medicine for endometriosis, dysmenorrhea, and menorrhagia. While philosophical principles remain the core of naturopathic practice, the therapeutic armamentarium appears to have changed over time, and a number of the original naturopathic treatments appear to have been retained as key elements of treatment for these conditions. Such insights into naturopathic treatments will be of particular interest to clinicians providing care to women, educators designing and delivering naturopathic training, and researchers conducting clinical and health service naturopathic research.

No 2.

Abstract: Complementary and alternative medicine (CAM) is an increasingly prevalent part of contemporary health care. Whilst there have been some attempts to understand the dynamics of CAM integration in the health care system from the perspective of conventional care providers and patients, little research has examined the view of CAM practitioners. This study aims to identify the experiences of integration within a conventional healthcare system as perceived by naturopaths.

Naturopaths support the integration of health services and attempt to provide safe and appropriate care to their patients through collaborative approaches to practice. The challenges identified by naturopaths associated with integration of CAM with conventional providers may impact the quality of care of patients who choose to integrate CAM and conventional approaches to health. Given the significant role of naturopaths in contemporary health-care systems, these challenges require further research and policy attention.

So, is Jon Wardle up to the job?

The answer obviously depends on what the job is.

If it is about publishing 100 more surveys that show nothing of much value and are essentially SCAM-promotion, then he ought to be fine.

If it is about rigorously testing which SCAMs generate more good than harm, then 'Huston, we have a problem'!





We would like to ask our supporters
to alert their friends to the important role being played by

Friends of Science in Medicine

and to encourage them to join as a Friend or add their support in other ways.

You can contact us and new supporters can join us at no cost at:

Email

scienceinmedicine@bigpond.com

Web

<http://www.scienceinmedicine.org.au>

or follow us on Facebook or Twitter

Facebook

<https://www.facebook.com/FriendsOfScienceInMedicine/>

Twitter

<https://twitter.com/friendsofscimed>
