Professor Edzard Ernst does not think complementary and alternative medicine should be taught as a scientific subject

The opposite of science

BSc courses in homeopathy are closing. Is it a victory for campaigners, or just the end of the Blair/Bush era?

Anthea Lipsot

Can a blog force a university to close a degree course? David Colquhoun, the University College London pharmacology professor behind the “Improbable Science” blog, would like to think so. Since 2003, Colquhoun has used his blog, along with freedom of information requests, to draw attention to universities running courses in complementary and alternative medicine (CAM). He argues that the treatments are unproven, degree courses unsound, and universities wrong to award students bachelor’s or master’s of science qualifications.

“It’s particularly offensive that they’re called BSc,” he says. “You have to address that. If you try to get people to get that placebo effect!”. They keep publishing what they call trials but are actually customer satisfaction surveys, you have no means of knowing how many people are withdrawing, you’re seeing the obvious response. They have to handle the homeopathy story in the end in order to go out and practice.”

Disappearing courses

This anti-academic-consumption campaign by Colquhoun and fellow scientists may finally be making a difference. Last month, UCLan (University of Central Lancashire) dropped its course in homeopathy for which the vice-chancellor, Professor Michael Harloe, won the prize of big-name scientists in a letter to the Times, Universities will never, in the “science base” of its courses, while the University of Central Lancashire (UCLan) suspended its homeopathy degree last year and is now undertaking a review of other courses.

No one from UCLan would comment. But a university statement acknowledges “demonstration of the scientific establishment. It is, however, that the decision was made for ‘financial and strategic reasons’, and will ‘continue to encourage and promote research into complementary and alternative medicine’. UCLan declined to comment until after its review ends in April. But a course leader last year said the university had always been “the subject of many attacks by the anti-homeopathy league”.

Professor Michael Harloe, who ran the course, says: “We’re being closed down.”

The idea you can put science into courses when they are simply anti-scientific is completely barren

David Colquhoun

In the case of UCLan, the “idea you can put science into courses when they are simply anti-scientific is completely barren”, Colquhoun adds. “If they recruit more scientifically rigorous staff who are supposed to be experts in that field, it would crumble.” He claims research to prove the effectiveness of CAM treatments is not done because academic practitioners “know that they would fail, but they say it’s because the methods of randomised clinical trials are useless”.

As well as Safford, Uclan and Westminster, the anti-Cam lobby has so far focused on the universities of Middlesex, Thames Valley, West of England, London South Bank, Napier and Southampton. But, in all, 16 universities across the country run a mixture of courses in subjects ranging from aromatherapy and herbalism to ayurvedic medicine and homeopathy. Those teaching the courses insist they are academically rigorous and scientific. Dr Peter Dais, dean of Westminster’s school of integrated health, says: “There’s been a certain amount of pressure from [lobbyists] but it hasn’t forced us because we believe in what we’re doing. And clinicians are referring people to complementary medicine therapists. Our job is to make sure practitioners are practising safely, competently, know their limitations, and can converse with healthcare professionals.”

Dais says there are echoes of the debate but it isn’t open as he would like. “The views expressed are intransigent, whereas on the ground is very different,” he says. “There’s no doubt that particular herbal remedies, Chinese or western, are extremely efficacious. The anti-science lobby has put most attention on homeopathy. But there are upwards of 450 medical doctors who practise it – I don’t believe they are all wrong or that it is just a placebo effect. Large numbers of people feel better having been treated by homeopathy.”

“We need to understand these therapies in much more critical way and that is what we’re attempting to do. We encourage our students to be research-minded and delib- erately set them assignments where results may look positive, but if they dig deeper they’ll realise the methodology is flawed. It isn’t in the notion of reflexive practice. Half of orthodox medicine has not neces- sarily got an evidence base but it’s observed that people get better — that doesn’t remove the need to research thoroughly. We’re attempting this by doing a clinical audit to establish a little more clearly what’s going on. We’re running a trial on Chinese herbs in the treatment of oesophageal cancer supported by the Department of Health. We’re trying to offer patients other choices.”

George Lewith, a professor of health research at Southampton University, has also felt under pressure. “A formal com- plaint of academic fraud made about me to my university and ethics committee was investigated, but it did not go anywhere,” he says. “My WC wasn’t aware whether to forgive me a personal chair because of what people might think, but our academic unit at Southampton received a £10,000 grant in the research assessment exercise and was the third best in primary care in the country. There’s considerable suspicion about CAM and it’s completely unfounded.”

Academic intent

All universities run courses in research methodology as part of their training. Lewith claims. “The quality of degrees is an open joke but there’s academic intent in most of the new universities in relation to their degrees. There’s little to choose between the initial training of medics and practitioners. The anatomy, physiology and basic chemistry learn is a similar, standard course. The criteria of which I have personal experience are academically rigor- ous enough and turn out safe and sensible practitioners,” he says.

But Professor Edzard Ernst, director of the complementary medicine centre at the University of Exeter, a school which tests Cam therapies, says most of the subjects are so far removed from science they should not be taught as scientific courses.

“BScs in homeopathy or herbalism are not only out of line with science but profoundly the opposite of science. They could be taught in a fashion but, as far as I can see, they aren’t and that’s astonishing. People are very cagey about discussing the contents of courses. To teach at academic level, these courses need critical evalua- tion as teachers rather than promoters of,” he says.

“Academics could present the claims and then look at the evidence and plausibility of the concepts, and do this with scientific rigour. But the sad truth is that that’s not happening. Students are unsuspicious vic- tims of brainwashing, if you take it to the extreme, which is the exact opposite of an academic degree.”

So why are the courses taught? “To put it bluntly, there’s a market for it,” Ernst suggests. “This begs the question — what’s more important, academic rigour or mar- ket forces? Surely I think the abundance of these courses indicates that it’s going the wrong way.”

But Colquhoun, however, is more optimis- tic. He believes the climate is starting to change after the Bush/Bush era where people believed in things because they wished them to be true.” This has been going on for a generation and it’s about time for a swing in the other direction,” he says. “Baffled has set an example and it seems likely others will now follow. It’s a great call.”

UCLan does stop courses, that would be a big deal.”