

Title of Project: Decision making in the use of Complementary Medicine

(FOR Code/s): 1104

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Location of Project: Campbelltown

Project Background

Complementary medicine includes a diverse range of medicines and therapies that are not considered to be core conventional medicine practices or core conventional allied health practices. Conventional medicine is medicine as practiced by registered medical practitioners and by a range of allied health professionals who support conventional medical practice and include physiotherapists, psychologists and registered nurses. 'Complementary medicine' is used to describe healthcare practices such as acupuncture, applied kinesiology, aromatherapy, Ayurveda, chiropractic, environmental medicine, herbal medicine, homeopathy, hypnosis, massage, meditation, naturopathy, nutritional therapy, osteopathy, reflexology, Reiki, Shiatsu, yoga among many others.

Approximately 2 in 3 Australians regularly use some sort of Complementary medicine, resulting in almost 4 times more being spent on CM (in out of pocket expenses) than on pharmaceuticals each year. Complexity around risk, responsibility and decision-making of medicine are important considerations to target information, expenditure and resources. Therefore an understanding of the decision making processes behind consumers' use of these medicines is essential to the Australian health care landscape. There is no such current comprehensive information available on decision making around the use of complementary medicines in Australia.

Aim of Study:

To understand the reasons behind consumers' preference for using complementary medicine or circumstances around this decision making and the associated cost benefits

Methods

Following a review of the international literature, a survey on decision making drivers will be designed using the most appropriate tools and techniques. The gap in knowledge will be defined and based on the gap in knowledge a survey will be designed using a survey tool and distributed in electronic and paper format to a cross section of the general public. Data will be analysed using the SPSS statistics package and prepared for publication.

Ethics Application Requirements:

'Low Risk' Human Ethics approval will be sought from the Human Research Ethics Committee at UWS

Key References:

1. Carmady, B., C.A. Smith, and B. Colagiuri, A comparison of decision-making processes for conventional and complementary medicine in cancer patients. *Complementary Therapies in Clinical Practice*, 2013. **19**(1): p. 32-35.
2. Conboy, L., S. Patel, T.J. Kaptchuk, B. Gottlieb, D. Eisenberg, and D. Acevedo-Garcia, Sociodemographic determinants of the utilization of specific types of complementary and alternative medicine: An analysis based on a nationally representative survey sample. *Journal of Alternative and Complementary Medicine*, 2005. **11**(6): p. 977-994.

3. Pirotta, M., V. Kotsirilos, J. Brown, J. Adams, T. Morgan, and M. Williamson, *Complementary medicine in general practice: A national survey of GP attitudes and knowledge*. Australian Family Physician, 2010. **39**(12): p. 946-950.
4. Xue, C.C., A.L. Zhang, V. Lin, C. Da Costa, and D.F. Story, Complementary and alternative medicine use in Australia: a national population-based survey. *The Journal of Alternative and Complementary Medicine*, 2007. **13**(6): p. 643-650.
5. Manderson, L., N. Warren, and M. Markovic, *Circuit Breaking: Pathways of Treatment Seeking for Women With Endometriosis in Australia*. *Qualitative Health Research*, 2008. **18**(4): p. 522-534.