



**CHC Submission to the NHMRC's Research Translation Faculty  
National Case for Action**

To:  
NHMRC Research Translation Faculty  
Amy Goodwin  
GPO Box 1421  
Canberra ACT 2601  
[faculty@nhmrc.gov.au](mailto:faculty@nhmrc.gov.au)

From:  
Emma Burchell  
Head, Regulatory Affairs  
Complementary Healthcare Council of Australia  
PO Box 450  
MAWSON ACT 2607

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The Complementary Healthcare Council of Australia (CHC) welcomes the opportunity to provide input into the NHMRC's Research Translation Faculty National Case for Action to address gaps between existing research evidence and health policy.

**1. Please describe what you consider is the most significant evidence-practice gap and the rationale for selecting it. (250 word limit)**

Over the last twenty years, there has been a growing body of scientific knowledge on the efficacy of complementary medicines. In addition, there are a growing number of economic analyses that highlight the cost effectiveness of complementary medicines, especially in the prevention and management of chronic disease.

Two such reports are the Access Economics report, '*Cost effectiveness of complementary medicines*' commissioned by the National Institute of Complementary Medicine in 2009, and the Frost & Sullivan report '*Smart Prevention – Health Care Cost Savings Resulting from the Targeted Use of Dietary Supplements*', a US study in which the authors found the use of key complementary medicines, including omega-3 fatty acids, B6, B12 and folic acid, could reduce hospital costs by \$US billions per year.

Both reports demonstrate the importance of taking complementary medicines as a means to combat unsustainable health care costs, and as a means for high-risk individuals to reduce their chances of having to deal with potentially costly disease-related events. Unfortunately, health policy in Australia does not yet recognise the contribution of complementary medicines and a significant gap exists in the translation of this evidence base into integrative medical practice.

The CHC believes that to ensure significant input into the health policy debate more research is required. By investing in a structured program of complementary medicine specific research, as suggested in this paper, the true cost effectiveness of complementary medicines in the healthcare system can be demonstrated and translated into clinical healthcare policy and practice.

**2. Please describe the action you would propose to address this gap, and what NHMRC should do. (400 word limit)**

Case for Action: Specific, targeted further research.

In emphasising the NHMRC's global leadership role its strategic plan identifies a need to facilitate the innovation process to maintain the strength of our medicines and biotech industries, our biggest manufacturing export earner and a key driver of a more competitive and productive economy<sup>1</sup>. Yet less than half of one per cent of National Health and Medical Research Council (NHMRC) funding supported complementary medicine research this year. A critical issue for consumers, health professionals and governments alike is in understanding the cost effectiveness of medical interventions, whether mainstream or complementary.

The CHC's recommendation is thus threefold:

- 1) For the NHMRC to allocate funding toward complementary medicine research in preventive healthcare, including for additional research into the cost effectiveness of the use of complementary medicines in Australia.
- 2) For the NHMRC to ensure strategic policy directions to invest ten per cent of annual funding toward complementary medicine research.
- 3) For the NHMRC to fund research that facilitates an innovative medicines industry.

Specifically, we propose that research should:

- Identify complementary medicines that can reduce health budget costs via reduced disease incidence or severity, reduced hospital stays and lower adverse events profile. This research should focus on the National Health Priority Areas such as arthritis and musculoskeletal disease, asthma, cardiovascular health and stroke, diabetes mellitus, mental health, and dementia.
- Develop appropriate clinical practice guidelines that translate the complementary medicine evidence base into integrative medical practice.
- Investigate the safe and concurrent use of complementary medicines and prescription medications.
- Identify the regulatory impediments to bringing new evidence based ingredients to market in Australia.

The generation of this data can then be further utilised by the medicines regulator and would coincide nicely into the Therapeutic Goods Administrations (TGA) review of the business processes for the pre-market assessment of complementary medicines. The business process reform focuses on policies around the evaluation of new substances and new registered complementary medicines with the aim of identifying opportunities to increase transparency and timelines for approvals processes.

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<sup>1</sup> National Health and Medical Research Council. (2012). NHMRC Strategic Plan 2013 -2015 (NH160). Retrieved from [http://www.nhmrc.gov.au/\\_files\\_nhmrc/publications/attachments/nh160\\_nhmrc\\_strat\\_plan\\_201315.pdf](http://www.nhmrc.gov.au/_files_nhmrc/publications/attachments/nh160_nhmrc_strat_plan_201315.pdf)

- 3. Please describe the potential impact of the action, including:**
- **Number of people affected**
  - **Potential economic impact**
  - **Timeframe for impact and how impact would be evaluated (400 word limit)**

75% of Australians use complementary medicines (CMs) and the majority can name the exact CM product they purchased and why.<sup>2</sup> This case for action would potentially impact all existing and future users of complementary medicines.

The National Preventative Health Taskforce has acknowledged that for far too long the health system has focused on treating people after they become unwell, and this had resulted in vast social and economic costs associated with chronic disease<sup>3</sup>. Complementary medicines are widely considered to offer a means of managing chronic conditions associated with greater life expectancy, and recent economic analyses suggest robust links between several of the more well-known complementary medicine products with major potential cost savings across several chronic conditions<sup>4</sup>.

Just as one example, the Access Economics report found that the use of St John's wort for mild to moderate depression provided costs savings relative to standard anti-depressants, with the unit cost of St John's wort estimated at \$0.17/day and the cost of standard antidepressants estimated as \$0.57/day. Across the 56% of Australians with mild to moderate depression that are taking medication, a saving of over \$50 million would be possible.<sup>5</sup>

It is envisaged that the action to facilitate an innovative medicines industry would lead to increased investment in R&D within the sector, and ultimately contributing to improved population health outcomes.

By driving the investment of scientifically robust substances and products, the evidence that has been established can be transparently communicated to consumers. As a result the action would have a broad application across the Australian population.

The CHC suggest that suitable timeframes should take into consideration the TGA and Medsafe transitional arrangements to ANZTPA (Australia New Zealand Therapeutic Products Agency). A program of harmonisation has commenced with expected establishment of the Agency by July 2016.

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<sup>2</sup> CHC Complementary Medicines Industry Audit May 2011

<sup>3</sup> Australian Government: Taking Preventative Action. A Response to Australia: The Healthiest Country by 2020, the report of the National Preventative Health Task Force.  
[http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/6B7B17659424FBE5CA25772000095458/\\$File/Foreward.pdf](http://www.preventativehealth.org.au/internet/preventativehealth/publishing.nsf/Content/6B7B17659424FBE5CA25772000095458/$File/Foreward.pdf)

<sup>4</sup> WHO Traditional Medicine Strategy 2002-2005, Geneva, 2002, p. 2, available from  
<http://www.who.int/medicines/publications/traditionalpolicy/en/>

<sup>5</sup> Access Economics Pty Ltd, Report for The National Institute of Complementary Medicine, Cost effectiveness of complementary medicines, 2010, piii.