



To Whom it May Concern,

We appreciate this opportunity to submit additional available evidence that was not previously included in the NTREAP 2014-2015 Natural Therapies Review, on behalf of the [Australian Naturopathic Council](#) (ANC). The ANC is a recently formed coordinating body of organisations representing the naturopathic profession in Australia. The ANC provides a united voice on important issues affecting Australian naturopaths. The ANC membership is comprised of the [Australian Register of Naturopaths and Herbalists \(ARONAH\)](#), [Complementary Medicine Association \(CMA\)](#), [Endeavour College of Natural Health \(ECNH\)](#), [Naturopaths and Herbalists Association of Australia \(NHAA\)](#) and [Southern School of Natural Therapies \(SSNT\)](#). Eligibility for inclusion in the ANC is based on membership with the [World Naturopathic Federation \(WNF\)](#). The WNF is part of the WHO, and represents over 50 naturopathic organizations from across the globe with the role to promote and advance the naturopathic profession.

On behalf of the ANC we applaud the decision by the Department of Health to undertake the 2019 Review. This is a great opportunity to update the evidence used to inform Australian health policy and, in doing so, address issues associated with the *2014-2015 Review of the Australian Government Rebate on Natural Therapies for Private Health Insurance* ('the 2014 Review'). While a range of issues have been documented related to the 2014 Review (Wardle, 2016; see Attachment), in this submission there are some specific areas that we would like to see addressed that directly relate to the naturopathic profession.

The 2014 Review systematically reviewed the effectiveness (and where relevant, the safety, quality and cost-effectiveness) of the whole practice of the natural therapies in question. In addition the 2014 Review noted that it was often not practical for some therapies (notably Western herbalism and naturopathy) to examine the efficacy of treatment options used by practitioners. For this reason, it was considered more feasible to examine only the whole health service as delivered by the practitioner. Despite these limitations, the 2014 Review found evidence that whole-system naturopathic practice is effective in improving patient health for a range of chronic conditions, including anxiety, multiple sclerosis, cardiovascular disease and musculoskeletal issues. Unfortunately this evidence was discounted on the basis that it was sourced from a jurisdiction where naturopathy is regulated and so could not be considered relevant in the Australian unregulated environment.



Since this time, further published research has been identified by a recent systematic review of naturopathic whole systems research that lists a number of additional health conditions: cardiovascular disorders, musculoskeletal pain, type 2 diabetes, PCOS, depression, anxiety and a range of other chronic conditions (Myers, Viga, 2019; see Attachment). ***We propose that this updated review of whole systems naturopathic research be included in the 2019 Review.***

Despite the growing number of publications that document naturopathic care benefiting a range of conditions, we propose the inclusion of evidence that pertains to 'tools of trade' used by a naturopathic health professional be added as a criteria for the 2019 review. Whole system research is rarely undertaken in registered health professions, and from this respect it would seem unreasonable to limit the outcome of this review on a type of evidence which is rarely utilised in other healthcare professions. For example, few studies, explore the efficacy of a general practitioner in a primary care role as the sole intervention, as opposed to the specific therapies being delivered by that practitioner. Similarly, few studies would exclude nutritional and dietary advice provided by a dietitian when assessing that profession's therapeutic value. Conversely, other therapies such as homeopathy (which we note are included as part of Tranche 2) are used by less than one third of naturopaths, less than 1% of research is done on homeopathy internationally, and the major colleges in Australia either no longer teach it, or have it as an elective subject (Steel, Foley, Bradley et al, 2020; World Naturopathic Federation, 2018; Wardle, J, Steel, A, Casteleijn, D, Bowman, D, 2019; see Attachment).

Recent research conducted by the World Naturopathic Federation (WNF) involved an international survey of naturopathic practice and patient characteristics, in order to gain insight to the breadth of their practices and the type of clinical conditions routinely encountered by naturopaths. Four core common treatment categories prescribed or recommended in clinical practice were highlighted as: dietary changes, lifestyle and behavioural changes, herbal medicine, and nutritional supplements. (Steel, Foley, Bradley et al, 2020; see Attachment). Supporting this study is some Australian research, that states naturopaths in Australia use a broad range of treatments in their practice including (but not limited to): lifestyle recommendations, dietary modifications, herbal medicine, meditation, exercise prescription, yoga, and nutritional supplementation. (Wardle, J, Steel, A, Casteleijn, D, Bowman, D, 2019; see Attachment). ***We propose that the scope of evidence related to naturopathic practice encompasses research encompassing the following treatment 'tools of the trade': Dietary changes, lifestyle changes, herbal medicines and nutritional supplements.***

We would also like to draw attention to some challenges when identifying naturopathic research evidence. The WNF, led by Australian naturopathic researchers, has undertaken a review of research conducted by naturopathic practitioners and has identified that the vast majority of



research carried out by naturopaths, does not specifically identify 'naturopathy' in the title of the article (Steel, Bradley, Wardle, 2019; see attachment). Naturopathic researchers have also argued that naturopathic research may not fall neatly under the testing of randomized clinical trials, but rather, in a more pragmatic setting (Schloss J, McIntyre E, Steel A, et al, 2019; see attachment) The WNF have provided the full list of published articles produced through this project (World Naturopathic Federation, 2018; see Attachment). A new updated and comprehensive list of books published by Australian and international naturopaths has also just been released by WNF. (World Naturopathic Federation, 2019; see Attachment). These are available on the WNF website. ***We propose that these lists of naturopathic research compiled by the WNF are used as a reference source in the 2019 review.***

Again, thank you for giving us the opportunity to contribute to this important review for Australian Government Rebate on Private Health Insurance for Natural Therapies 2019-20.

Best regards,

(ARONAH)

(CMA)

(NHAA)

(ECNH)

(SSNT)

As representatives of the organisations forming the Australian Naturopathic Council