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Pharmacy Professor Refutes Myths on Alternative Remedies

Montagne M. Myths & Realities of Alternative Therapies. *U.S. Pharmacist*. December, 1999:56, 63-64, 67.

Recognizing the difficulty of sorting truth from fiction in claims for alternative, nontraditional, unconventional and even spurious therapies, especially given that much information is from advertising and promotion, Michael Montagne, PhD, a professor at the Massachusetts College of Pharmacy, attacks several prominent myths for the benefit of pharmacists.

Among these myths are the belief that benefits from substance-based alternative therapies (homeopathy and herbals) are due solely to the "placebo effect"; that scientific information on herbal products is nonexistent; that alternative therapies as a rule are safer than pharmaceuticals; that pharmacists' only interest in alternative medicines is financial; that alternative medicine is a fad; and that people who use alternative therapies are either desperate, ignorant, or malcontents.

While some of these myths are, perhaps, straw men (most pharmacists will know that a placebo effect is seen in tests of many pharmaceuticals as well as alternative medicines, and that, in any case, it is not a negative or meaningless phenomenon), he does point out that, for the 70 - 90% of the world's population which depends on traditional therapies, "alternatives" are hardly a fad; and that research has shown that approximately one third of those who have access to conventional medicine use alternative treatments in conjunction with it, giving little credence to the notion that alternative medicine's consumers are simply dissatisfied with conventional approaches.

The belief that alternative therapies are considered "safer than synthetic Pharmaceuticals" by most consumers is based on the fact that herbal remedies come from "natural resources." According to the author, this myth is as dangerous and maybe more dangerous, than the myth that pharmaceuticals are always effective against disease. The author suggests that pharmacists consider all substance-based alternative therapies to be drugs.

He chides health professionals who disparage all alternatives, and who attribute pharmacists' interest in them to greed: "It is interesting to note that most... words used by conventional health professionals to describe... why people choose alternative therapies tend to be pejorative, paternalistic, sarcastic, ethnocentric, or negatively biased in some way."

Montagne recognizes legitimate differences among pharmacists in their approach to alternative therapies, but urges the realization that there are limits to what is known about conventional medicine as well. Putting patients first, orienting care to individual needs, and making the effort to study and learn about new advances in all types of medicine is fundamental to quality care. He quotes Ara der Marderosian: "We are all taught... that we must keep our minds open... for today's seemingly crazy treatment may become tomorrow's accepted practice. We need only to remind ourselves of how bizarre smallpox vaccination once seemed, how a mold (penicillin) may have curative powers, how willow bark (salicin) was the grandparent of aspirin, and more recently how capsaicin (from hot pepper) was shown to have bona fide analgesic properties... This is an age of experimentation in which pharmacists must help by guiding patients properly, particularly paying attention to their belief systems and adding their wisdom for successful medical management."

Even though herbals may be "troublesome", because of multiple components and variations in chemistry and quality, pharmacists who do not take the time to learn about them will be left behind by their patients, as the "\$18 billion consumer-driven market for herbals, homeopathic remedies, nutraceuticals, and dietary supplements" continues to grow.

- Mariann Garner-Wizard