

# Brexit – opportunities & risks for integrated healthcare

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@ANHcampaign  
ANH International

The background of the slide is a vibrant image of two galaxies in the process of merging, known as the Antennae galaxies. The galaxies are depicted with a mix of colors, including bright yellow and white at their cores, transitioning to orange, red, and finally blue and purple at their outer edges. The overall appearance is that of two large, irregularly shaped clouds of gas and dust, with long, thin filaments extending from their cores, resembling antennae. The background is a deep black space filled with numerous small, distant stars.

## POSITIVE

- Reductionism + holism
- East + West
- Traditional + Modern
- Reductionist + Holistic
- Metaphysical + Anatomical + Cellular + Molecular + Omic
- Specialist + Generalist + Collaborative
- Epigenetics

## NEGATIVE

- Questionable models of disease causation
- Natural v Patented
- Evidence informing Clinical Practice
- Mono- vs multi-therapeutic approaches
- Disempowerment of patient/client
- Burden on primary healthcare
- Lack of consensus

Antennae galaxies merging,  
Hubble (NASA)

# Tackling the growing crisis in the NHS



An agenda for action

7 April 2016

[Chris Ham](#), [Helen McKenna](#), [Phoebe Dunn](#)

The King's Fund has identified three big challenges for the NHS in England:

- [sustaining existing services and standards of care](#)
- [developing new and better models of care](#)
- [tackling these challenges by reforming the NHS 'from within'](#)

How can we  
the Cambridge  
address one  
ensure that the service can be both sustained and transformed.

**...essential actions needed to ensure that the service can be both sustained and transformed.**

[Chris Ham](#) to  
the NHS  
led to

# What are the underlying causes of the healthcare crisis?

1. Failure to prevent chronic and mental illness
2. Failure to treat disease earlier enough in the disease life cycle
3. Failure to engage citizens sufficiently in their healthcare
4. Failure to address healthcare inequalities
5. Failure to integrate multi-therapeutic interventions into a personalised approach
6. Failure to offer sufficient patient choice within the NHS



# Health vs Resilience

## Health

- A state of complete physical, mental and social well-being (WHO, 1948)
- A state of being free from illness or injury
- A state in which there is an absence of symptoms of disease
- A state that allows the individual to adequately cope with all demands of daily life (implying also the absence of disease and impairment)
- A state of balance, an equilibrium that an individual has established within himself and between himself and his social and physical environment

Sartorius N, *Croat Med J*. 2006 Aug; 47(4): 662–664

## Resilience

- Physiological resilience
- Emotional/psychological resilience
- Ability to ‘bounce back’ from and recover fully from stress or adversity
- Response to acute vs chronic stress
- An outcome of successful adaptation to adversity

Zautra AJ, Hall JS, Murray KE. Resilience: A new definition of health for people and communities. In: Reich JW, Zautra AJ, Hall JS, editors. *Handbook of adult resilience*. New York: Guilford Press; 2010. pp. 3–29



Centre for Integrative Care  
Image courtesy of Glasgow's *Evening News*

## PCTs consider alternative to homeopathic hospitals

15 March 2007

One of England's four homeopathic hospitals is at risk of closure because of primary care trusts' reluctance to refer patients outside the NHS mainstream. Other homeopathic hospitals are also facing severe financial problems

Kent PCT, which runs Tunbridge Wells Homeopathic Hospital and also refers the majority of patients, is consulting on whether to vet all referrals made by GPs to the hospital.

As part of cost-cutting measures the PCT announced at the end of last year, all referrals to the homeopathic hospital would be scrutinised by an individual treatments panel, which would decide whether or not the referral would go ahead.

Campaigners claim this would have meant many referrals being refused, and the subsequent slashing of resources could have resulted in its closure.

Following protests, Kent PCT has agreed to review its commissioning process for treatment at the hospital, and a decision is expected later in the spring.

The Royal London Homeopathic Hospital is also experiencing a severe cut in funding, following the cancellation of contracts by commissioning PCTs.

# Close them down?

# or use them as demonstrations of effective integrated care?



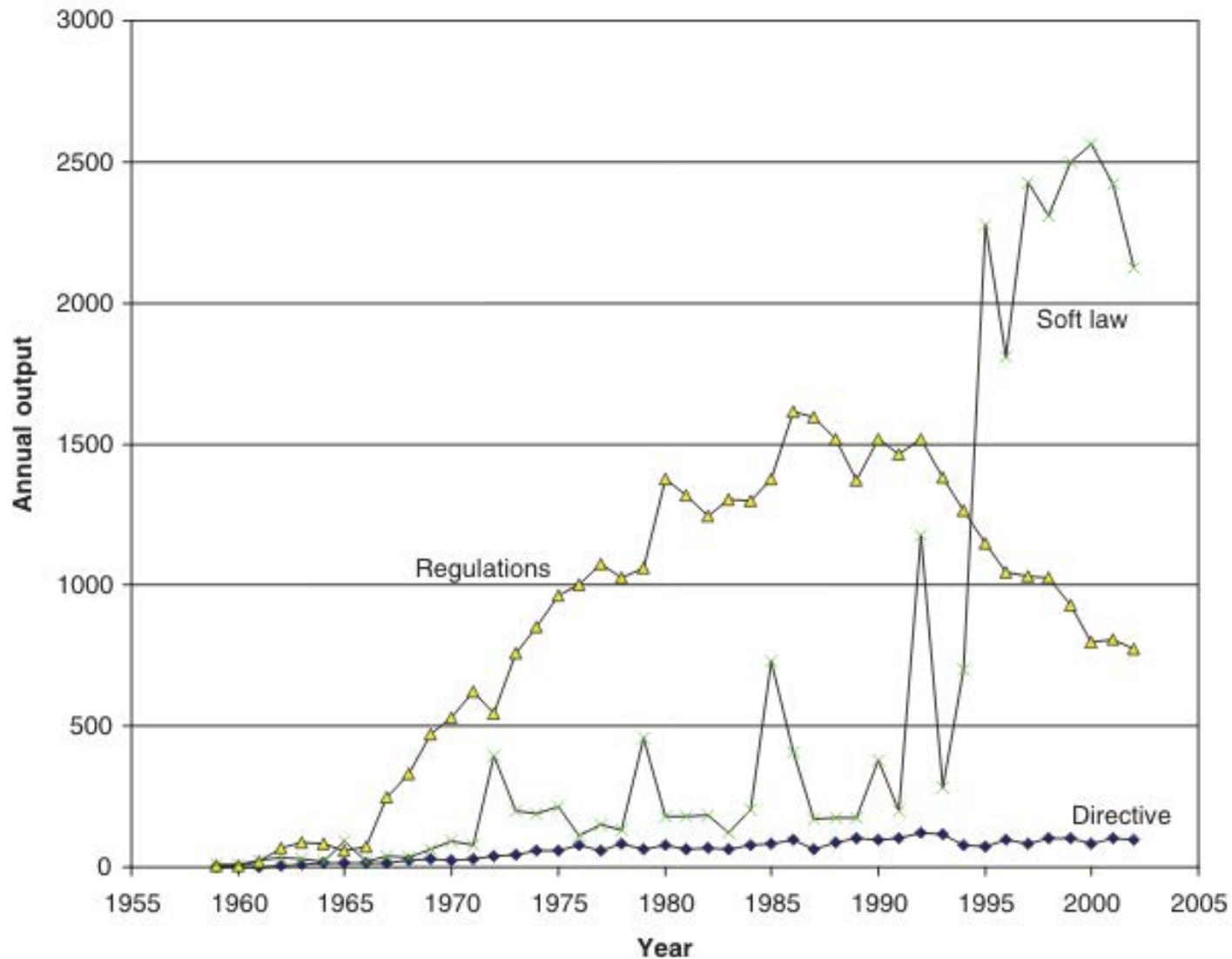
# What might a model of sustainable healthcare look like?

- Effective disease prevention
- Diet & lifestyle centre stage
- Primary care: integrated
- Secondary care: integrated
- Multi-modality care in the community
- Individual centred care
- Personalised care
- Multi-therapeutic
- Practitioner-guided
- Fully engaged
- Informed, self-monitored self-care
- Shared Medical Appointments





# The EU regulatory assault: how has it impacted healthcare in the UK?



# Key EU roadblocks to sustainable healthcare

- EU medicines law (2001/83/EC, as amended)
  - definition & scope
  - Traditional Herbal Medicinal Products Directive
  - homeopathic medicines
- EU Nutrition & Health Claims (1924/2006)
  - Scientific interpretation of causality
- Food Supplements Directive (2002/46/EC)
  - Missing minerals and nutrient forms
- Novel Food Regulation (2015/2283)
  - arbitrary red light for foods/ingredients with long-standing histories of safe use
- EU 'ring fencing' for products



Full article: <http://anhinternational.org/2016/07/06/eu-distorted-dozen>

# EU ring fences: Falling between stools and into the lion's den



## Food

Conventional and functional, including botanicals (not dose forms)  
Reg 178/2002

Novel Foods  
Reg 258/1997



## Food supplements

Concentrated sources of nutrients, dose forms  
Dir 2002/46/EC + national laws



## Medicinal Products

Dir 2001/83/EC

Mag prescrip



## THPs

Dir 2004/24/EC



# EU absurdities

- EFSA: “Insufficient evidence that water is involved in body functioning”
- Bans on use of the terms ‘superfood’, ‘probiotic’, ‘prebiotic’ and ‘antioxidant’ on labels, in marketing or any other commercial comms
- Claims that glucosamine helps joints are banned despite available evidence because studies were on ‘diseased’ not healthy populations
- EFSA/EC: insufficient evidence that berry fruits contain antioxidants
- EFSA/EC: Zero authorised claims for essential amino acids despite their essentiality
- Novel food bans on Hoodia, African mango, lo han guo - and many more
- EFSA’s upper limit for cinnamon means Christmas might lead to cinnamon health risk
- EFSA’s upper limit for selenium means a handful of brazil nuts could endanger health

Full article: <http://anhinternational.org/2016/11/02/eu-natural-health-absurdities>

# UK roadblocks to sustainable healthcare

- Healthcare delivery by the NHS: size, inflexibility, training, commissioning, funding, NICE guidelines
- 'Gold-plating' doctrine within UK authorities e.g. MHRA, FSA
- Failure to adequately embrace non-standard modalities
- Disregard for EU mutual recognition and case law
- Misinterpretation of principles of Evidence-Based Medicine



# Brexit options



- Hard or soft?
- Dual regime (UK and EU) for healthcare products and services
  - Create in the UK a dynamic, liberal, diverse UK hub for integrated healthcare goods and services
  - Create more seamless privately and publicly funded healthcare services
  - Reduce burden on essential services in NHS
  - Recognise non-standard healthcare modalities
- New definitions for medicinal products and foods to reduce uncertainty around borderlines between medicines and other categories of products (food, food supplements, cosmetics, medical devices)
- Statutory or other forms of recognition of healthcare professionals outside the currently authorised professions
- Create new framework for substantiating claims for health benefits in commercial communications
- Institute major legislative, institutional and operational reforms
- Powerful, coordinated grassroots pressure



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