

18. Complementary and alternative medicines

Many patients often take complementary and alternative therapies and would wish to continue taking when admitted to hospital. This chapter of the medicines code outline the responsibilities of healthcare professionals to identify patients on complementary therapy. This includes cannabidiol (CBD) oils often available from health shops.

18.1 Definitions

- **Complementary and alternative medicine (CAM)**-a broad term that includes herbal products, nutritional supplements, homeopathic medicines, aromatherapy oils and many other beliefs, therapies and practices.
- **Herbal preparations**- contain plant derived material, either as raw or processed ingredients which may be from one or more plants.
- **Homeopathy**- a holistic complementary and alternative therapy based on the concept of like to treat like, and involves the administration of dilute and ultra dilute products prepared according to methods given in homeopathic pharmacopoeias
- **Traditional Herbal Medicines Regulation Scheme (THMRS)** – herbal medicines which have a THR number will have been assessed by the Medicines and Healthcare products Regulatory Agency (MHRA) for quality and safety. Assessment ensures that products will contain the correct ingredient, right dose and will not be adulterated with other pharmaceutical materials or heavy metals. For products registered under the THMRS, permitted indications are based on traditional use of the preparation provided the pharmacological effects are plausible on the basis of long standing use and experience. Within the THMRS, traditional use means the herbal medicinal product has been in medicinal use for a period of 30 years, including at least 15 years within the European community. There is no requirement to demonstrate efficacy with data from clinical trials which is a key difference between a herbal medicine bearing a THR number and a conventional medicine with a Product licence (PL) number

18.2 Use of complementary medicines

Just as conventional medicines, herbal medicines, nutritional supplements and homeopathic medicines will have an effect on the body and can be potentially harmful if not used correctly. They should be used with the same care and respect as conventional medicines. Some patients are unwilling or do not think it necessary to tell health professionals that they are taking such therapy due to the perception that these are natural therapies and will cause no harm.

Healthcare professionals must actively ask patients if they are taking or wishing to take alternative therapy. This should be done during the medicines reconciliation process at admission, or at other times when medicines are discussed with the patient

Potential hazards include:

- interactions with conventional prescribed medicines, including anaesthesia.
- adverse reactions or toxicity to alternative therapy- some herbal therapy can be potent or toxic
- disease flare up whilst taking alternative therapy

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- patients self-treating an undiagnosed disease
- self-treatment of a serious medical condition with alternative therapy in preference to conventional medicine

Certain groups of patients may be particularly vulnerable to the effects of herbal medicines and caution should be used. These include paediatric patients, terminally ill patients, patients with difficult to treat or chronic illnesses (in which long term usage of herbal medicines may occur), older patients, and pregnant or breastfeeding patients.

The presentation of such products may include amongst other things: topical medicines, powders, tablets and capsules.

The use of patient's own homeopathic medicines, herbal medicines including herbal teas or food supplements must be discussed with a doctor and documented in the medical notes and written on the 'when required' prn section of the in-patient drug chart before they are used in the hospital.

Advice regarding the content of a product or specific drug interactions may be obtained from the Pharmacy Medicines Information department. If the patient requests advice on complementary therapy, the health care professional should contact a pharmacist or the Pharmacy medicines information department.

If the patient wishes to continue to use their complementary medicines, the patient or their carers must obtain further supplies themselves and should inform staff that they are continuing to take these preparations. They will not be supplied through the Trust pharmacies.

The patient must take responsibility for the safe storage of any complementary or alternative therapies brought into hospital.

18.3 Aromatherapy and other complementary therapies which do not have systemic absorption not covered above

Any member of staff who performs any such therapies must have undertaken specific accredited training. The member of staff must also have the agreement of the appropriate clinical lead to carry out any complementary therapy within the Trust.

The patient must consent to any complementary therapy.

Supplies of materials and equipment used for such therapies may only be obtained from the Trust approved suppliers.

Appropriate protocols must be agreed for local use – please see Trust guidelines and policies.

18.4 Reporting side effects

Side effects or adverse reactions to a herbal or alternative medicine can be reported to the Medicines and Healthcare products Regulatory Agency (MHRA) using the yellow card scheme – see chapter 10