Waarom wordt homeopathie niet vergoed?
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On the occasion of its 400th anniversary in June 2014, the University of Groningen gave everyone a chance to pose questions to experts from the university. 400 days for 400 questions was an elaborate public programme for the three northern Dutch provinces Groningen, Friesland and Drenthe, which lasted the entire anniversary month. Over 400 questions have come in and all these questions have been, or will be answered. One such question was posed to me. The original question and answer (in Dutch) can be found here. By request, I’ve made the below translation in English. Any mistakes due to the translation are mine, not my co-author’s Dr. E. Birnie (Faculty of Medicine, University of Groningen/UMCG).

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**Homeopathy**

**The question**

Why is homeopathy treated negatively in the media in the Netherlands, while in Germany and Switzerland it is an acknowledged therapy which was found to be cost negative (thus cheaper than regular healthcare!) in all studies performed there and are therefore reimbursed by the health care insurance as regular care. Even the post-treatment of cancer by Jens Wurster is reimbursed because it works and is cheaper. Are we then stupid or do we forget to look beyond regular care. The costs of health care keep on rising, partly because of the rise in the number of chronically ill. This group in particular can benefit from homeopathy. Isn’t it logical to start a trial with this group, so that these people get a chance to be cured in this manner. Who do we know that it doesn’t work in The Netherlands if we don’t try?

**The answer**

Even though homeopathy is offered by almost every Dutch insurer in the supplementary health care insurance, you are correct that it is not reimbursed in the (obligatory) basic health care insurance. The Dutch National Health Care Institute (ZiNL) advises the Minister of Health about the coverage in the basic health care insurance, based on four ‘package principles’: necessity, feasibility, effectiveness and cost-effectiveness. As long as a health care intervention does not adhere to these principles, it is not a responsible course of action to use public funding (“our” money) for it. The fact that homeopathic treatments are cost-saving means nothing: if we stop treatment of patients on the Intensive Care Unit this will also be very cost-saving, but this will result in
a drastically lower survival for these patients. Cost-saving is only a useful characteristic of a treatment if the health outcomes are just as good, or better. In other words: the treatment first has to be effective.

According to the Dutch Royal Society of Homeopathy (“Koninklijke Vereniging Homeopathie Nederland”) homeopathic treatments are plants or substances with a mineral of animal origin, which have been “potentiated”: reduced and shaken according to a special method. [1] This happen so often, that nothing can be found from the original basic material in the end product. How homeopathy works is therefore scientifically implausible [2,3,4] and impossible.[5]

To show effectiveness, the British Homeopathic Association (BHA) collected all available evidence of treatment in 2009, for a hearing with the Science and Technology Committee in the British Parliament.[6] In this study, four papers were cited. Jean-Pierre Boissel, involved in two of the studies [7,8], later stated to be surprised at the way his work had been interpreted. What he and his colleagues had found was evidence of considerable bias in the results: systematic differences often caused by a faulty study design.[9] The higher the quality of the trials producing results, the less favourable they were to homeopathy.[7,8] The third study found that there was not enough evidence for hard conclusions.[10] The final study, published in 1997 [11], received an update two years later, which was more critical on homeopathy.[12] This updated version was purposefully excluded from the review by the BHA. When positive results were found, these can all be explained by faulty research, reporting bias (selective reporting) or merely coincidence.[2,7,8,10-12] The outcomes of the hearings were clear: a lot of research has already been done, homeopathy doesn’t work, and it is unethical to conduct new studies.[4,13]

The fact that it doesn’t “work” (is demonstrable effective) does not mean that it doesn’t “help” (the patient feels better). The placebo effect is the best example of this: give a group of patients a sugar pill, tell them it’ll make them feel better and many will indeed feel better. Not because it works (after all, it’s just a sugar pill), but because of the placebo effect. Similarly, many people may feel better after taking homeopathic treatment: it helps them. Because of this, many people have become convinced that it also “works”, but that really is a step further. The difference between “works” and “helps” is primarily psychological and is therefore exclusively found in relatively “soft” outcomes as pain perception, concentration, quality of life and fatigue.
This brings us to the example of Dr Jens Wurster. This German doctor in Swiss service was involved in a study of 639 cancer patients at the University of Freiburg, which was divided in two groups: a group that was treated in a regular hospital and a group treated in a homeopathic treatment center.[14] Those patients that received homeopathic treatments reported higher quality of life and less fatigue after three and twelve months: classic examples of effects that can be achieved with placebo. Difference in survival or other “hard” outcomes were not studied. In addition, the treatment was not blinded, nor randomized: the researcher knew whether the patient received homeopathic care (observer bias) and patients chose the treatment themselves (selection bias). These are major methodological problems, which mean that possible conclusions have to be drawn very carefully.

Claims about hard outcome measures are all from a book, written by Wurster himself.[15] In this book, he describes the results of 12 “end-of-treatment patients” he treated, of which ten were still alive after 6 years. However: no solid study design; no comparison with a group that was not treated; no evidence that he didn’t choose selectively from his patients; no scientific publication. In other words: no proof. A practitioner who really wants to cure seriously ill patients, organizes a solid study and ditto scientific publication to publicize the results, before entering the paid lecture circuit via a self-written book. Anybody who is able to show that the life of cancer patients is prolonged using homeopathy, will at first be received with skepticism (as will anybody who claim improbable results in science), but will, after the study results are confirmed in independent studies, change the face of medical science.

It is often said that “it doesn’t hurt to try”. But that is not true either. Even if homeopathic treatment is nothing more than an expensive bottle of water, the health dangers are serious, if people avoid proven effective treatments. And with this we return to the cost savings. A homeopathic treatment, which in itself also costs money, can only be cost saving in two cases: if another (proven effective) treatment is not used, or if the patient dies earlier which reduces health care costs. Both aren’t attractive options.

New studies are unnecessary, because of the large amount of available evidence, and can even be called unethical.[13] In addition, there are financial obstacles. Even if the treatment options that are compared are free, a study costs (a lot of) money: finding study participants, logging results and analyzing the data. In the case of pharmaceutical treatments, it is usually the pharmaceutical company that design and pay for these
studies; in the case of homeopathic treatments it could easily be the producers who do this. It is really saying something that this doesn’t happen, despite the clear advantages to producers of homeopathic treatments if the effectiveness can be shown.

Why homeopathic treatments are not reimbursed in The Netherlands? Because they do not meet the package principle of effectiveness. In the best case, homeopathic treatments are a placebo given by naïve optimists, in the worst case an expansive form of deceit sold to sometimes desperate patients.

**Literature**

[1] Koninklijke Vereniging Homeopathie Nederland
[4] UK Parliamentary Committee Science and Technology Committee - "Evidence Check 2: Homeopathy"
[12] Linde, K; Scholz, M; Ramirez, G; Clausius, N; Melchart, D; Jonas, WB (1999), "Impact of Study Quality on Outcome in Placebo-Controlled Trials of Homeopathy", Journal of Clinical Epidemiology 52 (7): 631–6, doi:10.1016/S0895-4356(99)00048-7, PMID 10391656