



POLICY

Complementary and Alternative Therapies

STATUS:	APPROVED
Confirmed by Council:	February 2011
Amended:	January 2020
To be reviewed:	June 2023

THE COLLEGE'S POSITION

Patients have a right to make decisions about their health care including choosing complementary or alternative therapies instead of, or as an adjunct to, conventional medicine.

It is unethical to engage in or to aid and abet in treatment which has no acceptable scientific basis, may be dangerous, may deceive the patient by giving false hope, or which may cause the patient to delay in seeking conventional care until his or her condition becomes irreversible.

PHYSICIANS WHO CHOOSE TO USE COMPLEMENTARY OR ALTERNATIVE THERAPIES IN THEIR PRACTICE

Physicians who choose to practise complementary or alternative therapies in combination with conventional medicine must practise in a manner that is informed by medical evidence and science and is in keeping with their professional, ethical and legal obligations. Physicians must always act within the scope of their practice based on their qualifications, skill and knowledge, and level of competence.

Physicians must:

- conduct appropriate and conventional examinations and investigations in order to establish a diagnosis and basis for treatment
- employ a rigorous medical approach before offering any complementary or alternative therapy
- not delay or supplant the use of an effective and proven therapy with a complementary or alternative therapy, except at the direction of the patient
- counsel the patient, to the best of his or her ability and knowledge, about the risks and benefits of any procedure, so that the patient can give informed consent
 - the details of the consent process, including the rationale for providing an alternative therapy as explained to the patient, must be documented in the patient's medical record

- only provide complementary or alternative therapies if standard therapies have been offered and explained to the patient, and the patient and the physician have selected the complementary or alternative therapy.
 - The discussion with the patient must include a comparison of the risks and benefits of complementary or alternative therapies and the risks and benefits of standard therapies
- only provide complementary or alternative therapies if, in the physician’s opinion, the potential benefits of the therapy outweigh the risks
- respect the autonomy of the patient in choosing from available treatment options
 - if the patient’s choice of a complementary or alternative therapy has made it impossible for the physician to discharge his or her ethical responsibilities, it is acceptable for the physician to terminate the patient-physician relationship
- never exploit the emotions, vulnerability, or finances of a patient for personal gain or gratification

RISKS

One of the risks of using unconventional treatment is that more appropriate treatment may be delayed.

All physicians must monitor the results of treatment, whether it is conventional treatment or not.

The same standards of care that are expected in conventional diagnosis and treatment apply to the use of unconventional treatment. A physician should not provide an unconventional therapy simply because the patient demands it.

ETHICAL EXPECTATIONS

Physicians are reminded that College bylaws which incorporate *The Code of Ethics and Professionalism* establish expectations for Saskatchewan physicians. Among those expectations are the following:

A. VIRTUES EXEMPLIFIED BY THE ETHICAL PHYSICIAN

HONESTY. An honest physician is forthright, respects the truth, and does their best to seek, preserve, and communicate that truth sensitively and respectfully.

HUMILITY. A humble physician acknowledges and is cautious not to overstep the limits of their knowledge and skills or the limits of medicine, seeks advice and support from colleagues in challenging circumstances, and recognizes the patient’s knowledge of their own circumstances.

INTEGRITY. A physician who acts with integrity demonstrates consistency in their intentions and actions and acts in a truthful manner in accordance with professional expectations, even in the face of adversity.

PRUDENCE. A prudent physician uses clinical and moral reasoning and judgement, considers all relevant knowledge and circumstances, and makes decisions carefully, in good conscience, and with due regard for principles of exemplary medical care.

B. FUNDAMENTAL COMMITMENTS OF THE MEDICAL PROFESSION

Commitment to the well-being of the patient

Consider first the well-being of the patient; always act to benefit the patient and promote the good of the patient.

Provide appropriate care and management across the care continuum.

Take all reasonable steps to prevent or minimize harm to the patient; disclose to the patient if there is a risk of harm or if harm has occurred.

Recognize the balance of potential benefits and harms associated with any medical act; act to bring about a positive balance of benefits over harms.

Commitment to respect for persons

Always treat the patient with dignity and respect the equal and intrinsic worth of all persons. Always respect the autonomy of the patient.

Never exploit the patient for personal advantage.

Commitment to professional integrity and competence

Practise medicine competently, safely, and with integrity; avoid any influence that could undermine your professional integrity.

Develop and advance your professional knowledge, skills, and competencies through lifelong learning.

C. PROFESSIONAL RESPONSIBILITIES

PHYSICIANS AND PATIENTS

5. Communicate information accurately and honestly with the patient in a manner that the patient understands and can apply, and confirm the patient's understanding.
6. Recommend evidence-informed treatment options; recognize that inappropriate use or overuse of treatments or resources can lead to ineffective, and at times harmful, patient care and seek to avoid or mitigate this.

Decision-making

In the process of shared decision-making:

11. Empower the patient to make informed decisions regarding their health by communicating with and helping the patient (or, where appropriate, their substitute decision-maker) navigate reasonable therapeutic options to determine the best course of action consistent with their goals of care; communicate with and help the patient assess material risks and benefits before consenting to any treatment or intervention.

Managing and minimizing conflicts of interest

22. Recognize that conflicts of interest may arise as a result of competing roles (such as financial, clinical, research, organizational, administrative, or leadership).
23. Enter into associations, contracts, and agreements that maintain your professional integrity, consistent with evidence-informed decision-making, and safeguard the interests of the patient or public.
24. Avoid, minimize, or manage and always disclose conflicts of interest that arise, or are perceived to arise, as a result of any professional relationships or transactions in practice, education, and research; avoid using your role as a physician to promote services (except your own) or products to the patient or public for commercial gain outside of your treatment role.
25. Take reasonable steps to ensure that the patient understands the nature and extent of your responsibility to a third party when acting on behalf of a third party.
26. Discuss professional fees for non-insured services with the patient and consider their ability to pay in determining fees.

PHYSICIANS AND SOCIETY

41. Provide opinions consistent with the current and widely accepted views of the profession when interpreting scientific knowledge to the public; clearly indicate when you present an opinion that is contrary to the accepted views of the profession.

PROFESSIONAL AFFILIATIONS WITH COMPLEMENTARY OR ALTERNATIVE HEALTH-CARE PROVIDERS

In choosing to form a professional affiliation with a (regulated) complementary or alternative health-care provider, physicians should be satisfied that the proposed care or health benefit is safe, or at minimum, not more risky than comparable conventional interventions or not more risky than not receiving conventional interventions.

Physicians may seek advice on these issues by contacting the College and asking to speak with a member of the registrar staff, or by seeking medical legal advice from the CMPA.

The College gratefully acknowledges the College of Physicians and Surgeons of British Columbia for permitting its document Complementary and Alternative Medicine to be adapted in preparing this standard.

OTHER RESOURCES

College of Physicians and Surgeons of Saskatchewan – *Policy – Informed Consent and Determining Capacity to Consent*

Canadian Medical Protective Association *Alternative Medicine –what are the medico-legal concerns?*