

20 June 2006

HOMOEOPATHIC VETERINARY MEDICINES

Thank you for the open letter of 16 June signed by yourself and a number of professional colleagues.

The current VMD consultation, as I understand it, does not in fact propose to legitimise the prescribing of homoeopathic medicines by veterinary surgeons. The Veterinary Medicines Regulations 2005 do not place any obstacles in the way of a veterinary surgeon who is minded to prescribe a homoeopathic remedy. Part 9 of Schedule 1 to the regulations allows such products to be marketed on the basis of a registration by the Secretary of State without proof of efficacy, and homoeopathic products on the market as veterinary medicinal products before 1 January 1994 can also be marketed without even being registered. It is thus clearly already the intention that it should be possible to market homoeopathic veterinary medicines without proof that they work. VMD have realised, however, that there is a defect in the drafting of the regulations which means that they cannot be lawfully *administered*: hence the consultation to correct the lacunae.

You suggest that RCVS should make a statement in support of evidence-based medicine. We did so in October 1999, in a submission to a House of Lords inquiry into complementary and alternative medicine. This included the following:

"Veterinary surgeons practise science-based medicine. The patient cannot say how it feels, and the practitioner must rely on observation to find out whether treatment is effective or not.

The corpus of baseline clinical knowledge is less developed and secure than in human medicine, because veterinary medicine must cover a wide range of species and has therefore not had a comparable investment in research. Veterinary surgeons must nevertheless ground their practice on objective evidence, applying normal evidential standards to complementary and alternative treatments. Every adult has the freedom to make personal choices concerning their own health, regardless of medical evidence. This does not imply a similar freedom to impose such choices on their animals if there is a likelihood of adverse effects, including those arising from denial of conventional therapy. It is therefore essential that such treatments are indeed 'complementary' rather than 'alternative' to mainstream therapy until they can be proved."

Those are still the views of RCVS. The College has not, on the other hand, taken a view on the efficacy or otherwise of homoeopathy. We take the view that that is a matter for debate in the usual way, with publication of evidence in peer-reviewed journals, and that it would not be right for RCVS to seek to limit the clinical discretion of veterinary surgeons.

Whatever views there may be within the veterinary profession it is clear that there is a demand from some clients for complementary and alternative therapies. It is better that they should seek advice from a veterinary surgeon - who is qualified to make a diagnosis, and can be held to account for the treatment given - rather than turning to a practitioner who does not have veterinary training. That is why RCVS has in the past published in the Register a list of veterinary surgeons who hold homoeopathic qualifications. Now that we have updated the "Find a Vet" part of the RCVS website (www.rcvs.org.uk/findavet) so that the public can find and choose veterinary practices who offer complementary treatments we feel this is more helpful than publishing a list of practitioners in the Register.

Finally, if you are concerned about the VMD's stance in relation to the marketing and administration of homoeopathic treatments it would perhaps be appropriate to take the matter up with them directly.

Yours sincerely

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President, RCVS