

Cost-Effectiveness and Complementary Medicine

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American medicine has grown out of the allopathic tradition through a series of rigorous self-examinations as to the appropriateness and effectiveness of therapies and interventions. Early in the allopathic tradition there was significant controversy with those physicians and institutions that ascribed to a homeopathic ideology. With time these two ideologies blended together, and today medical schools throughout the nation are by and large indistinguishable one from the other with respect to their early heritage. Allopathic and homeopathic institutions established almost a century ago are now providing comparable training experiences. More recently, there was a similar accommodation with doctors of osteopathy so that today DOs function with their MD colleagues as an integral part of the healthcare system.

As managed care continues to transform the face of American medicine, numerous states are mandating additional types of providers of healthcare as part of state approved benefit packages. The incorporation of naturopathic practitioners in the state of Washington [House Bill 1809, 1995] is a notable inclusion.

These decisions by legislative and regulatory bodies throughout the United States have caused a great emotional response with a significant amount of subjective and anecdotal materials being used to support the positions of each side. In fact, in some medical circles, feelings on these issues are running as high as they did with the incorporation of chiropractic services into HMO benefits around the nation. In large part, the chiropractic concern has now subsided. Managed care organizations are gradually beginning to articulate

what the roles, relationships and responsibilities of the plans are with regard to chiropractic services. The managed care industry has hence avoided the litigations and anti-trust suits that were so damaging and costly to the American College of Surgeons, pathology, radiology, and others two decades ago.

It is hoped that collectively all of us in the managed care industry can learn from the problems that occurred when our relationships were dictated by subjective parameters. Ultimately we are going to have to undertake to evaluate the efficacy and economics of each of these newcomers to the healthcare industry. Some ultimately will be found wanting; some, in time, will educate the skeptical.

It was only a matter of time until *The American Journal of Managed Care*, as arbiter and chronicler of the changing healthcare environment within the managed care industry, received a viable article dealing with issues outside the mainstream. In this issue is an article titled "Cost-Effective Hypertension Management: A Comparison of Drug Therapies with an Alternative Program." Even though this paper cites a different and potentially controversial approach to hypertension management, Herron and colleagues have clearly done their homework and have presented a well-balanced and scientific paper. This paper was carefully considered and scrupulously critiqued in the peer review process. It does, however, step outside the mainstream of today's allopathic focus. Perhaps the topic and its reception and will be reminiscent of the obstacles encountered by homeopathic, naturopathic, chiropractic, osteopathic and other "alternative" practitioners. Since this study does move beyond the mainstream, it will become incumbent upon each reader to review this article with the intent of furthering the dialogue about the role of alternative therapies in managed care.

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