

# What's the harm in alternative therapies?

April 28 2015, by Emma Smith

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We often see stories in the media about cancer patients who have chosen alternative treatments, either alongside or instead of conventional treatment.

Every cancer patient has the right to decide what, if any, line of treatment they wish to pursue.

But we believe it's vital that people make fully informed decisions based on genuine [evidence](#) about the risks and benefits of any therapy – whether alternative, complementary or conventional – in discussion with their doctor.

To be clear, 'alternative' usually implies a treatment is used instead of conventional medicine, while 'complementary' therapies are used alongside regular medical treatments.

Unfortunately, media and online coverage of alternative therapies often doesn't tell the whole story or include professional medical advice, and can be very misleading.

## **"Natural is better"**

One of the big selling points advocates of alternative therapies use is to claim that conventional treatments are 'toxic' while their favoured treatment is 'natural', implying that natural is somehow better.

This is a fallacy that we've previously explored in detail in our post about that infamous herb, cannabis.

Many treatments for cancer and other diseases were originally derived from naturally-occurring substances. The chemotherapy drug Taxol, created from a compound found in yew leaves, is a prime example.

Conversely, some of the most poisonous substances in the world – ricin, cyanide, arsenic, hemlock, snake venoms and mercury to name but a few – are all entirely natural.

Furthermore, alternative 'natural' therapies are not guaranteed to be safe. Examples include a serious risk of cyanide poisoning from laetrile, permanent scarring or disfigurement from cancer salves, and bowel

damage, blood salt imbalances or even life-threatening septicaemia caused by coffee enemas.

## **"But it works... I read it in the news!"**

Stories in the news about alternative therapies are usually framed in the words of a patient talking about their own cancer journey. But this is neither scientific proof nor any kind of guarantee that a treatment is effective or safe.

News reports may provide incorrect or confusing medical information, such as misreporting the type and stage of disease or the true chances of survival, and failing to point out any conventional treatments that were used alongside or before seeking alternative therapy.

In some cases this may be the result of accidental omissions or errors, especially if a reporter is only relying on the patient themselves as the source of their story.

Cancer is a complex disease, and without access to detailed medical records – which are confidential – it is impossible to paint a fully accurate picture of an individual's cancer journey and whether alternative therapies played any role in their recovery.

More worryingly, there are some cases where evidence points towards a murkier interpretation of 'truth' and fact.

For example, Australian blogger Belle Gibson built a large media profile and business around the story of having apparently 'healed herself' of a brain tumour through diet and lifestyle changes, but has now admitted that she never actually had cancer at all.

People pushing alternative therapies frequently wheel out stories from

'survivors' who are apparently alive due to their treatments, yet without providing solid evidence to prove it is true. This raises false hope and unrealistic expectations that there is a hidden miracle cure that can be unlocked for the right price, or by eating exactly the right foods.

As a result, patients and their loved ones may feel guilty or angry for not trying everything that they possibly could have done, despite there being no evidence that such treatments would have helped.

Stories of people 'healing themselves' through diet or other therapies make good headlines. However, if the same person later dies from their cancer it often goes unreported, leaving readers with the misconception that the alternative treatment was a success.

Understandably, there may be huge reluctance among family members to admit that alternative therapy failed, especially if it came at a high cost or reduced quality of life. This problem goes back more than a century, as detailed in a paper [published in the \*British Medical Journal\* from 1911.](#)

It reveals how an alternative "cancer curer" continued to reassure a husband that his wife was recovering after she had actually died, even going so far as to continue applying dressings to the poor woman's body. Her husband and friends were "ashamed of having been duped and they kept quiet," while the quack went unpunished.

## **Where's the evidence?**

*"Do you know what they call alternative medicine that's been proved to work? Medicine" Tim Minchin, Storm*

When a doctor recommends a course of treatment their decision is based on the best available information about the chances of saving or

prolonging a patient's life, along with any risks and benefits.

Sadly we know that in too many cases even the best treatments can fail, which is why we're continually researching more effective ways to diagnose and treat cancer. Even so, the treatments we have today – including surgery, radiotherapy and chemotherapy – have helped to double cancer survival rates since the 1970s.

We understand that people want to hang on to any glimmer of hope that they or their loved one can be cured, particularly when facing a terminal cancer diagnosis. But despite what alternative therapists may claim, they do not have evidence to support the effectiveness of the treatments they offer. Yet they do normally stand to make money – many thousands of pounds in some cases – from selling ineffective treatments and advice.

Of course, pharmaceutical companies stand to make money from cancer treatments too and we've written about this at length. But they must provide evidence of the effectiveness, safety and side effects of their treatments through lab research and clinical trials. This information is assessed by doctors and healthcare providers when deciding whether a treatment should be made available for patients and paid for by the health service or insurance.

We have extensive information outlining the scientific evidence – or lack of it – for a wide range of alternative and complementary treatments on our website.

If there was good evidence that alternative treatments work, then they should stand up alongside [conventional treatments](#).

But the truth is that they don't.

In addition, the potential costs to patients of placing their hopes in

alternative treatments go beyond financial ones.

## **The hidden costs**

One of the biggest risks of seeking [alternative therapy](#) is postponing or declining evidence-based conventional treatment, which might otherwise prolong or even save a patient's life.

Perhaps the most famous example is Steve Jobs, the former head of Apple. He was widely reported to have pancreatic cancer, but in fact he had a very different type of cancer called a neuroendocrine tumour which started in his pancreas. After diagnosis he refused medical advice to have surgery and chemotherapy, opting for alternative therapies such as acupuncture, juicing and other treatments he found on the internet.

By the time Steve finally agreed to surgery, his cancer had spread and was untreatable. There is no way of knowing if delaying conventional treatment made a difference to his ultimate outcome, but it's a decision he reportedly regretted.

Then there is the issue of pursuing unproven alternative treatments overseas. Travelling abroad can be risky if a patient is unwell, even leading to emergency hospital admissions if anything goes wrong or their health deteriorates unexpectedly. Because arranging appropriate insurance can be difficult, sorting out any problems that occur while abroad can be extremely costly and stressful.

Another risk is that patients choosing to use alternative therapies may miss out on opportunities for palliative care, such as effective pain relief or reducing the symptoms of advanced cancer with radiotherapy or drugs. Although they cannot provide a cure, palliative therapies can make a big difference to quality of life in the end stages of cancer.



Whether you love or loathe the concept of the 'bucket list', pursuing unproven [alternative treatments](#) – particularly abroad or involving arduous and restrictive regimes – robs people of valuable time that they could be spending with family and friends.

## **Making informed choices**

We're continually looking at the evidence behind all kinds of cancer treatments, whether conventional, alternative or complementary, providing extensive information about them [on our website](#). And we are working as hard as we can to develop more effective, kinder treatments for all types of [cancer](#), bringing more tomorrows for patients and their families.

We would like to encourage everyone to ask for the evidence behind claims made for 'miracle cures' and consider whether it is scientifically robust and convincing.

To help, we have a web page about finding and judging reliable information on the internet. [This piece in The Conversation](#) about scientific evidence is helpful, as is their [collection of articles about understanding research](#).

Provided by Cancer Research UK

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