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Complementary
Therapies in
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Use of complementary and alternative medicine by children in Europe: Published data and expert perspectives

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Abbreviations: CAM, complementary and alternative medicine; EU, European Union.

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Summary

Introduction: Few data document the use of complementary and alternative medicine (CAM) in Europe, with even fewer investigating use by children.

Methods: A narrative, non-systematic review of CAM use in Europe was performed by combining data from published surveys with expert perspectives. Limitations created by a lack of representative studies, varying definitions of CAM use, and what qualifies as CAM in different countries was partially overcome by integrating local experts to summarise information available only in the national language and provide their perspectives about CAM availability, quality, use and popularity in their countries using a semi-structured questionnaire. Local and international published surveys were summarised, and the prevalence of CAM use was extrapolated.

Results: Data from 20 European countries were available, representing 69% of the European population. Some data about CAM use by the general population were available for 90% of the examined countries, whereas peer-reviewed published surveys were available for only 60%. We extrapolated that 56% (range: 10–90%, adjusted for population size) of the European population in general had used CAM at least once in the past year. Surveys in CAM use by children were available for 55% of the investigated countries. The extrapolated prevalence of CAM use by children in Europe was 52% (range: 5–90%, adjusted for population size). Paediatric CAM experts reported an increasing awareness for and use of CAM in healthcare institutions.

Conclusion: This precursor for further surveys indicates that CAM appears to be popular not only among adults in Europe, but also for children. Development of a pan-European definition of CAM use and CAM therapies are required to achieve surveys comparable between European countries. Additionally, more research investigating the efficacy and potential adverse effects of CAM therapies is needed because of increasing CAM use by children in Europe.

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Introduction

Complementary and alternative medicine (CAM) includes practices that are not an integral part of the conventional healthcare system, but are used by many patients to supplement their care.¹ Particularly patients in western industrial nations show an increasing interest in using CAM to treat acute and chronic diseases.^{2–4} This rising interest includes both adults and children.^{1,5–7} Professional organisations, such as American Academy of Pediatrics and the WHO, have begun to collect and publish information about which types of traditional and complementary medicine are used by certain patient groups.^{8,9} Efforts to include education and training for CAM therapies in medical school programs and in healthcare institutions have also become popular in some European countries.^{10,11}

Europe covers approximately 10,180,000 km² (3,930,000 sq. mi), consists of approximately 50 states and hosts a population of 731 million people. Europe is distinguished by its wide variety of languages, cultures and religions. This heterogeneity makes assessing CAM use and CAM training across Europe as a whole difficult. Exact numbers for the prevalence of CAM use in Europe are not available. Europe-wide surveys of CAM use by the public in general and not focussed on patients with a specific disease currently do not exist. The survey conducted by Molassiotis et al. gathered data for CAM use by cancer patients in 16 European countries using a descriptive investigation, and found that 36% of the cancer patients surveyed have used some form of CAM (range among countries: 15–73%).¹² They identified a heterogeneous group of 58 therapies being used by cancer patients. Recent studies conducted in Europe report that CAM use by children is less common than by adult patients, but appears to be increasing in some European countries.^{9,13,14} Although there have been some recent efforts in singular European

countries to investigate paediatric CAM usage and characterise the CAM user, an international comparative survey has not yet been done.^{15–18} The aim of this survey was to present an overview about characteristics of CAM use in children in different European countries and to estimate the prevalence of CAM use by the population in general, and more specifically by children, in Europe despite the scarcity of peer-reviewed published surveys.

Methods

A narrative, non-systematic review was assembled by combining expert opinions with a thorough and balanced review of available evidence from the literature.¹⁹ An unrestricted literature search using the keywords, “alternative”, “complementary”, “integrative”, “prevalence” and “paediatric” or “children” was performed by internet search using PubMed and open accessible search engines. All European countries with a minimum of 5 million inhabitants were initially included for which any data about CAM use in children were published in the last 10 years (29 countries), then expanded to include 2 smaller countries. Corresponding authors from these publications were contacted in each country, and they were asked to provide information about paediatric CAM use in their countries. These authors stand out because of their activities in investigating CAM in paediatrics and were of different professions and positions, such as physicians, scientist and others. No negative selection had to be made, because paediatric CAM experts in European countries are very rare. We developed a semi-structured questionnaire divided into three sections for provision of (1) general information about CAM use, (2) CAM use by paediatric patients, and (3) space for an expert’s summary, conclusion, and personal comments. We requested that each participating expert

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