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Editorial: in praise of visionary scepticism.

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Editorial

David Peters

Editor-in-chief



In praise of visionary scepticism

It would be foolish to assume holism has won its spurs. The JHH commissioning list proves there's no shortage of creativity in healthcare education, practice and research, but articles focussing on all three areas invite us to keep an open mind about progress towards mainstream holism, and not to let our brains drop out. For it can be tough out there, especially where the purseholders put cost before value: the value of therapeutic human relationships, of humanistic research, human resources, or the human need for kinds of healthcare that don't quite fit the public sector mould.

Whereas five years ago resources for CAM research were negligible, the situation is now quite different. In America the government is channelling vast sums into complementary medicine research; here, the Department of Health has just awarded its second round of (more modest) three year grant funding dedicated to CAM. If all goes well, a hugely under-researched field will at last start finding some answers. But will they be to the right questions?

When the Research Council for Complementary Medicine was founded in 1983, CAM research was in its infancy, and there was heated debate about research methods. Don't, warned frontline humanistic researcher Peter Reason and educationalist John Heron, fall into the trap set by RCTs, for they are designed to strip away essential human factors. Experimental approaches, they insisted, will distort CAM, treating it as a matter of pills rather than skills, as technical rather than inter-personal. It was a matter of babies and bath water; modern medicine had some effective magic bullets (entirely a fit subject for RCTs) but lacked emotional intelligence, and the wrong kind of research would lose CAM up the same creek. It's fair to say that

the argument was lost, for experimental CAM research subsequently took to the RCT like a duck to water. Or, as Paul Dieppe tells us in a keynote article, more like a lamb to the slaughter. His cage-rattling article asks whether researchers into complementary medicine should not be far more cautious about colluding with 'gold standard' clinical trials.

The same theme – a questioning of received wisdom about integration and the assumption that holism is just around the corner – emerges throughout this issue. David Aldridge tells practitioners to think twice when shaping research questions, to make sure they reflect the realities of whole person care, and to keep beauty and spirituality in their sights, for they too are researchable. Michael Hyland wants science to keep an open mind about love and healing, for quantum theory may yet provide a new way of understanding the therapeutic relationship. Michael Lingard counsels caution on the integration of complementary medicine into the mainstream, believing it may force CAM to march to the same robotic drummer as conventional practice. We probably assume that medical education prepares junior doctors for the hospital system; Beth Griggs suggests not, and puts the case for holistic survival skills. David Reilly reminds us that popularity and a successful track record are no guarantee that holism in its various guises can survive in the NHS.

This issue shakes up a few assumptions about holism and integration and asks us to think again. Yet every article also makes inspiring and visionary suggestions about the way ahead. Visionary scepticism about non-holistic healthcare is something we should cultivate, along with a hunger for inspirational examples of what can be achieved. This issue has both in full measure.