

2022 RACGP curriculum and syllabus for Australian general practice

Integrative medicine

Rationale

Instructions

This section provides a summary of the area of practice for this unit and highlights the importance of this topic to general practice and the role of the GP.

Integrative medicine (IM) 'reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic and lifestyle approaches, healthcare professionals and disciplines to achieve optimal health and healing'.¹ The IM approach is holistic and considers spiritual, social and lifestyle issues, which are increasingly being recognised as important drivers of chronic disease and ill-health. IM refers to integrative medicine modalities, which involves integrating complementary medicine (CM) into conventional healthcare using an evidence-based approach.

CM refers to a broad set of healthcare practices that are not part of that country's own traditional or conventional healthcare and are not fully integrated into the dominant healthcare system.² CMs include biologically-based products, mind-body therapies and traditional medicine systems.³ Use of CM in Australia has remained consistently high for decades, with nationally representative surveys conducted in 2007 and 2017 reporting that 63–68% of respondents used CM in the preceding 12 months.^{4,5} CM use is higher in people who have chronic disease, high pharmaceutical use, report failure of conventional medical treatments or wish to reduce side effects from treatment,^{4,6-8} signalling unmet healthcare needs.

Risks from using CM may be direct (eg drug–herb interaction), indirect (eg delayed diagnosis/treatment)^{9,10} or financial, as most CM use incurs out-of-pocket costs. There are consistently low rates of disclosure of CM use to physicians. Reasons for non-disclosure include lack of inquiry from physicians, fear of disapproval and belief that physicians lack CM knowledge.¹¹

Conversely, the evidence base for effectiveness of CMs is growing rapidly,¹² and CMs are increasingly being included in clinical guidelines.^{13,14} Many modalities demonstrate excellent safety profiles,¹⁵⁻¹⁷ and may reduce the use of, and therefore risk from, pharmaceuticals such as opioids, and reduce

healthcare use overall.¹⁸ Statutory regulation of three modalities in Australia (osteopathy, chiropractic and Chinese medicine) provides additional safeguards.¹⁹

It is important to acknowledge patient preferences around use of traditional medicine, which refers to health practices and beliefs indigenous to different cultures,² and has a long history of use in many cultures for maintaining health and wellbeing. These include Ayurveda, traditional Chinese medicine and traditional Aboriginal and Torres Strait Islander medicine.

All general practitioners (GPs) should be able to demonstrate basic skills and knowledge of IM due to the high prevalence of community use and need for informed decision-making. IM encompasses important elements of quality general practice (such as whole-person care and patient-centredness) and is not separate to general practice. A study of Australian GPs found that many GPs consider that the practice of IM starts with the foundation of good general practice.²⁰ Other studies report that patients want their GPs to be informed about CM,²¹ and that both patients and GPs see the value of a team-based model of IM, often with the GP as the clinical leader, coordinator and referrer to CM practitioners.²¹⁻²⁴ Practising IM also improves patient satisfaction and the patient–practitioner relationship.^{25,26}

References

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Competencies and learning outcomes

Instructions

This section lists the knowledge, skills and attitudes that are expected of a GP for this contextual unit. These are expressed as measurable learning outcomes, listed in the left column. These learning outcomes align to the core competency outcomes of the seven core units, which are listed in the column on the right.

Communication and the patient–doctor relationship	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> use a non-judgemental approach when enquiring about the use of complementary medicine 	1.1.1, 1.3.1
<ul style="list-style-type: none"> use a supportive approach when discussing integrative medicine to help patients make informed decisions 	1.1.1, 1.1.2, 1.2.1
<ul style="list-style-type: none"> clearly and respectfully communicate the reasons for refusing requests considered to be unreasonable or without an evidence base 	1.1.2, 1.2.1
<ul style="list-style-type: none"> provide continuity of care through referral to appropriately qualified providers of integrative medicine modalities where appropriate 	1.4.2
<ul style="list-style-type: none"> provide continuity of care through referral to appropriately qualified providers of integrative medicine modalities where appropriate 	1.2.1, 1.4.1, 1.4.4
<ul style="list-style-type: none"> establish effective therapeutic relationships with Aboriginal and Torres Strait Islander peoples by building trust through provision of culturally safe and respectful care which supports the use of traditional Aboriginal and Torres Strait Islander medicine 	1.4.3, AH1.4.1, RH1.4.1

Applied knowledge and skills	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> discuss and monitor for potential interactions when prescribing pharmaceuticals and complementary supplements concomitantly 	2.1.9, 2.2.2
<ul style="list-style-type: none"> take a comprehensive and clearly documented history that incorporates a patient's use of integrative or traditional medicines, lifestyle habits and factors affecting their spiritual and psychosocial wellbeing 	2.2.1
<ul style="list-style-type: none"> develop patient-centred management plans with patients, families or carers that use integrative medicine modalities with consideration of spiritual, psychosocial and lifestyle needs 	2.1.3, 2.2.2
<ul style="list-style-type: none"> discuss safety concerns and recommendations on integrative medicine use, including potential benefits and risks such as possible adverse reactions, supplement/drug interactions and financial cost 	2.3.2, 2.3.4, AH2.3.2

Applied knowledge and skills	
<ul style="list-style-type: none"> consider evidence for the use of integrative medicine in the management of chronic and complex health issues 	2.1.8, 2.1.9, 2.1.10, AH2.1.2, RH2.1.1, 2.2.1, 2.2.2, 2.3.1, 2.3.4

Population health and the context of general practice	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> identify patterns of use of complementary and integrative medicine modalities in their community 	3.1.1, 3.2.2

Professional and ethical role	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> respect the right of patients to make informed decisions about the type of care they wish to receive, including integrative medicine modalities and traditional medicine practices, for example, Aboriginal and Torres Strait Islander, Chinese and Ayurvedic medicine 	4.1.1, 4.1.2, 4.1.5
<ul style="list-style-type: none"> adhere to relevant codes and standards of ethical and professional behaviour including maintaining professional and mutually respectful relationships and clear communication with patients and other healthcare providers about integrative medicine, including on social media 	4.1.1, 4.1.4, 4.1.5
<ul style="list-style-type: none"> reflect on personal attitudes and knowledge about the integrative medicine approach 	4.2.2, AH4.2.1, AH4.2.2
<ul style="list-style-type: none"> critically analyse quality evidence-based resources to inform on the use of integrative medicine modalities 	4.4.1

Organisational and legal dimensions	
Learning outcomes	Related core competency outcomes
The GP is able to:	
<ul style="list-style-type: none"> explain and obtain informed consent on integrative medicine use in a manner of shared decision-making 	5.2.2
<ul style="list-style-type: none"> be aware of professional legislative requirements and regulations regarding integrative medicine approach and modalities 	5.2.2

Words of wisdom

Instructions

This section includes tips related to this unit from experienced GPs. This list is in no way exhaustive but gives you tips to consider applying to your practice.

Extension exercise: Speak to your study group or colleagues to see if they have further tips to add to the list.

1. Keep an open mind. Our patients often bring us the latest news on innovations in integrative medicine modalities. Before dismissing a new approach, take some time to read the evidence on it. You might learn something and your patients will be grateful that you took them seriously! Adopting an attitude of curiosity can be very helpful to both you and your patient, and this can include learning about what different cultures use in their traditional medicines and therapies. On the other hand, patients also appreciate their doctor advising them if something is unsafe to take alongside their medications, or providing other evidence-based advice. Consider seeking a second opinion or advice if a patient presents with questions and queries which are beyond your scope of practice.
2. Get to know the integrative medicine practitioners (GPs and/or complementary therapists) in your area and build a collaborative relationship with them. You could use patient and peer feedback to identify who is reputable and reliable, and/or contact the RACGP Integrative Medicine Specific Interest network to establish a relationship with a member in your local area.
3. Using integrative medicine modalities for your own health and wellbeing may be a great way to understand the value of integrative medicine. For example, some people have found yoga and mindfulness meditation helpful in their daily lives.
4. Similarly, looking after your own psychosocial, spiritual and lifestyle needs is a great form of self-care. Try to get enough exercise, sunshine, fresh air, plant-based wholefoods and relaxation. Practise self-care and you will feel better for it. These self-care practices can also help you to better understand your patient's experience, strengthening the therapeutic relationship.
5. Patients find it very helpful for their GPs to go through their list of complementary therapies, including supplements, and rationalise their use. You might discover that a patient is 'doubling up' on vitamins and minerals across their supplements, and can advise them to stop one or more of them.

Case consultation example

Instructions

1. Read this example of a common case consultation for this unit in general practice.
2. Thinking about the case example, reflect on and answer the questions in the table below.

You can do this either on your own or with a study partner or supervisor.

The questions in the table below are ordered according to the [RACGP clinical exam assessment areas](https://www.racgp.org.au/getmedia/f93428f5-c902-44f2-b98a-e56d9680e8ab/Clinical-Competency-Rubric.pdf.aspx) (<https://www.racgp.org.au/getmedia/f93428f5-c902-44f2-b98a-e56d9680e8ab/Clinical-Competency-Rubric.pdf.aspx>) and domains, to prompt you to think about different aspects of the case example.

Note that these are examples only of questions that may be asked in your assessments.

Extension exercise: Create your own questions or develop a new case to further your learning.



Ellen is a 53-year-old woman requesting a repeat script for perindopril which she takes for hypertension. She is otherwise well, with normal lipids and fasting glucose done recently. She has a family history of breast cancer (mother had postmenopausal breast cancer).

Ellen's blood pressure is 140/90 mmHg which is a little higher than previously recorded for her. She wonders if it is due to poor sleep. Her last menstrual period was two years ago and since then she has struggled with persistent hot flushes and night sweats. She says she does not wish to take any menopausal hormone therapy due to her family history of breast cancer, but prefers 'natural approaches', and has recently started taking a herbal supplement for menopause called Menopause Supplements Extra Strength Hot Flash Support, that she purchased online.

Questions for you to consider		Domains
<p>What communication strategies can you use to approach this consultation in a non-judgemental and empathic manner?</p> <p>How would you approach this case if Ellen wanted to use a traditional medicine from her culture (such as Aboriginal, Torres Strait Islander, or Chinese) for hot flushes?</p>	1. Communication and consultation skills	1,2,5
<p>What additional history and examination do you need to assist Ellen in making an informed decision about the use of integrative medicine modalities for her hot flushes?</p>	2. Clinical information gathering and interpretation	2
<p>What are the potential risks associated with the use of this supplement? Think about both direct and indirect risks.</p> <p>How will Ellen's family history and medical history influence the decision about whether this supplement is safe?</p>	3. Making a diagnosis, decision making and reasoning	2
<p>What resources can you use to understand the risks and benefits of using this supplement, including information on herb-drug interactions?</p> <p>What non-pharmacological strategies (including other integrative medicine modalities) can you suggest to Ellen to help her manage her hot flushes and general wellbeing after menopause? What if her main concern was poor sleep causing fatigue?</p> <p>How can you monitor the safety of this supplement for Ellen?</p>	4. Clinical management and therapeutic reasoning	2
<p>What strategies can you use to facilitate shared decision-making?</p> <p>What preventive strategies would you need to consider for Ellen that are specific to menopause?</p> <p>How would your strategies be different if Ellen was an Aboriginal or Torres Strait Islander?</p> <p>Consider how being in a rural location might affect accessibility to integrative medicine practitioners and complementary medicine products. How can you support your patients to access high quality complementary medicine care?</p>	5. Preventive and population health	1,2,3

Questions for you to consider		Domains
<p>How can you communicate effectively with complementary therapists/integrative medicine providers if Ellen decides to see one?</p> <p>Where can you find reliable evidence on complementary medicines?</p> <p>How would you approach this consultation if Ellen presents with a list of investigations that have been requested by a complementary therapist, so that the tests can be bulk billed?</p>	6. Professionalism	4
<p>What regulatory issues do you need to consider if Ellen wants to see a complementary therapist?</p> <p>What are the potential risks with the manner in which Ellen is purchasing this supplement (ie online)?</p>	7. General practice systems and regulatory requirement	5
N/A	8. Procedural skills	2
<p>How will you approach the consultation if there is insufficient or inconclusive evidence for the integrative medicine modalities that Ellen wants to use?</p> <p>How would you approach the consultation if there are safety concerns about the supplement Ellen wants to use?</p> <p>What if Ellen is using a supplement a friend gave her, and can't remember what it is called?</p>	9. Managing uncertainty	2
<p>How would you approach managing a patient who is very ill, for example, diagnosed with metastatic cancer or presenting with severe depression, and who wants to use integrative medicine modalities, either integrated with or as an alternative to conventional treatment?</p>	10. Identifying and managing the significantly ill patient	2

Learning strategies

Instructions

This section has some suggestions for how you can learn this unit. These learning suggestions will help you apply your knowledge to your clinical practice and build your skills and confidence in all of the broader competencies required of a GP.

There are suggestions for activities to do:

- on your own
- with a supervisor or other colleague
- in a small group
- with a non-medical person, such as a friend or family member.

Within each learning strategy is a hint about how to self-evaluate your learning in this core unit.



On your own

Identify and critically appraise three evidence-based resources on complementary therapies.

- *How easy will it be to use these resources during a consultation? What could you do to make it easier? How up to date are these resources? Do they give you enough information to make a decision?*

Do a case note review of at least one patient you have seen who mentioned using a complementary therapy.

- *What was the patient using the therapy for? What beliefs drove this decision?*
- *Did you refer to any evidence-based resources during the consultation? Did you have a conversation about risks and benefits?*
- *Did you enquire about complementary medicine use or did the patient volunteer the information? What strategies can you use to make sure you regularly enquire about complementary medicine use? Why is this important?*

Identify five herbal or nutritional supplements that are commonly used in Australia.

- *How many people use these in Australia? Why are they using them? What is the evidence for efficacy for different clinical indications? What are the potential mechanisms of action? What are the common adverse events and herb–drug interactions that you need to be aware of?*



With a supervisor

Ask your supervisor about a patient they have seen who was using a complementary therapy.

- *What strategies did your supervisor use to communicate effectively and respectfully about appropriate use of complementary therapies? Were there any barriers to being able to communicate effectively and how could you or your supervisor overcome them in the future?*
- *What evidence-based resources were referred to in the consultation about the risks and benefits of complementary therapies? Does your supervisor know of any reliable forms of consumer information on complementary medicines that they provide to their patients?*
- *Have they had to report any adverse events, and if so, how was this done?*
- *What can you learn from your supervisor's experience? What take-home messages have you got from this discussion?*

Find out if your supervisor and/or your clinic has a directory of trusted and experienced complementary therapists to refer to, and review this with your supervisor.

- *What information is important to know before referring to a complementary therapist? Does this directory contain that information? If not, can you add it to the directory?*
- *Consider asking one of the therapists if you can sit in on a consultation.*

Find out if there is a medicines information hotline that you can call that includes information on complementary medicine.

- *What information does the hotline provide? How up to date is this information?*

Tell your supervisor your ideas for improving practice processes to ensure patients are asked about complementary therapy use.

- *Why is this important? How can you make sure you are regularly enquiring about complementary medicine use? Think about different aspects of clinic workflow and practice, for example, the intake form, nursing assessments (eg during GP management plan/health assessments).*
- *What feedback did your supervisor have about your ideas?*

Discuss the use of commonly used complementary therapies, such as acupuncture, herbs and supplements such as fish oils, phytoestrogens and vitamins/minerals, and mindfulness and yoga. You could also discuss your findings on the risks and benefits of commonly used herbs and nutritional supplements.

- *How often does your supervisor consider recommending these therapies?*
- *Has your supervisor or anyone at the clinic done extra training in this area? How do they keep up to date with evidence on complementary therapies? What do they know about the safety of these therapies?*



In a small group

Role-play a case consultation with an older person who uses glucosamine or fish oil for osteoarthritis. (You could also write your own case about complementary medicine use, with another modality, context or condition. You could use the information you gathered on the commonly used herbs/nutritional supplements, or from discussions with your supervisor.)

- *What communication strategies did you use? Try a few different styles of communication, for example, respectful/disrespectful. How did the 'patient' feel in the different scenarios?*
- *How can you explain evidence clearly and succinctly so that patients can understand and are empowered to make informed decisions?*
- *As a group, you might also reflect on how to be prepared for these consultations and the communication strategies that seem to work well.*

Identify a systematic review or meta-analysis that has been published in a peer reviewed journal within the last 12 months of the efficacy of a complementary therapy for your chosen indication. Ask the group to read it and then discuss the article.

- *What databases/resources did you use to identify the article? Were you confident in being able to search for appropriate articles? If not, how could you improve on this?*
- *How can you assess the quality of the systematic review/meta-analysis?*
- *What were the findings and how can you use them within a consultation? How certain were the findings?*
- *How can you communicate the findings to your patients without using jargon?*



With a friend or family member

Ask friends and/or family members if they have used a complementary therapy in the past 12 months. If they have, ask them: What did they use? Why did they use that therapy? What information did they base their decision on? How did they critically analyse that information? What issues did they consider before using the therapy? How did they choose a complementary therapist (if they decided to see a therapist)? How effective did they consider the therapy to be? Have they recommended it to others and why?

- *Were you surprised by this information? How will it inform your practice?*

Guiding topics and content areas

Instructions

These are examples of topic areas for this unit that can be used to help guide your study.

Note that this is not a complete or exhaustive list, but rather a starting point for your learning.

- Know the prevalence of use of integrative medicine modalities, why they are used, and by whom.
- Understand the potential role of integrative medicine and its limitations in clinical practice. Consider a range of clinical presentations, for example, antenatal, mental health, cardiovascular and cancer.
- Understand the delivery methods, risks and benefits of commonly used integrative medicine modalities:
 - mind-body interventions, such as mindfulness meditation, yoga, tai chi and qigong
 - nutritional supplements and herbal medicines
 - manipulative and body-based therapies, such as acupuncture, chiropractic, osteopathy and massage
 - traditional medicine systems, such as Chinese medicine, Ayurveda and traditional Aboriginal medicine
 - environmental medicine.
- Take a non-judgemental history on use of integrative medicine modalities.
- Provide advice on safe use of integrative therapies, including interactions with medications, and be aware of common interactions of concern, such as with anticoagulants.
- Facilitate effective team-based care around the use of integrative therapies, including communicating clearly with integrative medicine providers and referring to qualified providers, where appropriate.
- Consult point-of-care evidence-based resources on integrative medicine modalities to inform treatment decisions.
- Report side effects appropriately.
- Be able to refuse unreasonable requests, for example, for unproven pathology tests, in a respectful manner that allows you to maintain a therapeutic relationship.
- Consider patients' values, preferences and beliefs, including on use of traditional medicine systems, when advising on use of integrative therapies.
- Consider patients' health literacy when advising on use of integrative therapies.
- Consider patients' spiritual, psychosocial and lifestyle needs when taking a history and providing a management plan.
- Consider how to assess quality of complementary medicine products when making recommendations.

Learning resources

Instructions

The following list of resources is provided as a starting point to help guide your learning only and is not an exhaustive list of all resources. It is your responsibility as an independent learner to identify further resources suited to your learning needs, and to ensure that you refer to the most up-to-date guidelines on a particular topic area, noting that any assessments will utilise current guidelines.

Journal articles

A guide to approaching integrative medicine practice in Australia, including ethical and legal implications.

- Kotsirilos V, Cohen M, Sali A, Warnecke E. [Best practice for integrative medicine in Australian medical practice](https://drmarc.co/wp-content/uploads/2016/04/BEST-PRACTICE-FOR-INTEGRATIVE-MEDICINE.pdf) (<https://drmarc.co/wp-content/uploads/2016/04/BEST-PRACTICE-FOR-INTEGRATIVE-MEDICINE.pdf>). Adv Integr Med, 2014;1(2):69–84.

Textbooks

An integrative framework that can be used in consultations.

- Kotsirilos, Vitetta and Sali: A guide to evidence-based integrative and complementary medicine. 1st edn. 2011. (Available from the RACGP library.)

Comprehensive monographs on commonly used herbs and natural supplements.

- Braun and Cohen: Herbs and Natural Supplements, An evidence-based guide. Vol 2, 4th edn. 2014. (Available from the RACGP library.)

Online resources

Tips on how to communicate effectively with patients about complementary medicine use.

- NHMRC. [Talking with your patients about complementary medicine – A resource for clinicians](http://www.nhmrc.gov.au/about-us/publications/talking-your-patients-about-complementary-medicine-resource-clinicians#block-views-block-file-attachments-content-block-1) (<http://www.nhmrc.gov.au/about-us/publications/talking-your-patients-about-complementary-medicine-resource-clinicians#block-views-block-file-attachments-content-block-1>).

Information about nutritional supplements (eg probiotics).

- The Royal Australian College of General Practitioners. [Handbook of Non-Drug Interventions \(HANDI\)](http://www.racgp.org.au/clinical-resources/clinical-guidelines/handi) (<http://www.racgp.org.au/clinical-resources/clinical-guidelines/handi>).

Background information on integrative medicine modalities, including information on the scientific evidence for effectiveness, and adverse events. From the USA.

- National Center for Complementary and Integrative Health. [Resources for health care providers](http://www.nccih.nih.gov/health/providers) (<http://www.nccih.nih.gov/health/providers>).

This American website has links to free clinician and patient education on various health topics, such as ADHD and breast cancer.

- Department of Family Medicine and Community Health, University of Wisconsin. [UW Integrative health program](http://www.fammed.wisc.edu/integrative) (<http://www.fammed.wisc.edu/integrative>).

An American website with a comprehensive, evidence-based database of resources that GPs can use to identify scientific evidence for effectiveness and safety of many integrative medicine modalities (not limited to cancer).

- Memorial Sloan Kettering Cancer Center. [Integrative medicine](http://www.mskcc.org/cancer-care/diagnosis-treatment/symptom-management/integrative-medicine) (<http://www.mskcc.org/cancer-care/diagnosis-treatment/symptom-management/integrative-medicine>).

Learning activities

A webinar on managing women's health concerns (PCOS, endometriosis, menopause, dysmenorrhoea, premenstrual syndrome) with integrative medicine.

- RACGP events. [Natural therapies in women's health](http://www.racgp.org.au/racgp-digital-events-calendar/online-event-content/natural-therapies-in-women-s-health) (<http://www.racgp.org.au/racgp-digital-events-calendar/online-event-content/natural-therapies-in-women-s-health>).

eLearning activity on incorporating integrative medicine in the management of chronic pain.

- The Royal Australian College of General Practitioners. [gplearning](http://www.racgp.org.au/education/professional-development/online-learning/gplearning) (<http://www.racgp.org.au/education/professional-development/online-learning/gplearning>):
 - Chronic pain: An integrative approach.

Other

Use this website to report adverse events to the TGA.

- Therapeutic Goods Administration. [Database of adverse event notifications](https://www.tga.gov.au/database-adverse-event-notifications-daen) (<https://www.tga.gov.au/database-adverse-event-notifications-daen>).

An overview of the regulation of complementary medicines in Australia.

- Therapeutic Goods Administration. [Regulation of complementary medicines in Australia](https://www.tga.gov.au/overview-regulation-complementary-medicines-australia) (<https://www.tga.gov.au/overview-regulation-complementary-medicines-australia>).

Information on statutory regulation of Chinese medicine, osteopathy and chiropractic.

- [Ahpra](http://www.ahpra.gov.au) (<http://www.ahpra.gov.au>).

Voluntary register of herbalists and naturopaths.

- [Australian Register of Naturopaths and Herbalists](http://www.aronah.org/) (<http://www.aronah.org/>).

This contextual unit relates to the other units of:

- [Addiction medicine](https://www.racgp.org.au/curriculum-and-syllabus/units/addiction-medicine) (<https://www.racgp.org.au/curriculum-and-syllabus/units/addiction-medicine>)
- [Cardiovascular health](https://www.racgp.org.au/curriculum-and-syllabus/units/cardiovascular-health) (<https://www.racgp.org.au/curriculum-and-syllabus/units/cardiovascular-health>)
- [Doctors' health](https://www.racgp.org.au/curriculum-and-syllabus/units/doctors-health) (<https://www.racgp.org.au/curriculum-and-syllabus/units/doctors-health>)
- [Ear, nose, throat and oral health](https://www.racgp.org.au/curriculum-and-syllabus/units/ear-nose-throat-and-oral-health) (<https://www.racgp.org.au/curriculum-and-syllabus/units/ear-nose-throat-and-oral-health>)
- [Endocrine and metabolic health](https://www.racgp.org.au/curriculum-and-syllabus/units/metabolic-and-endocrine-health) (<https://www.racgp.org.au/curriculum-and-syllabus/units/metabolic-and-endocrine-health>)
- [Haematological presentations](https://www.racgp.org.au/curriculum-and-syllabus/units/haematological-presentations) (<https://www.racgp.org.au/curriculum-and-syllabus/units/haematological-presentations>)
- [Men's health](https://www.racgp.org.au/curriculum-and-syllabus/units/mens-health) (<https://www.racgp.org.au/curriculum-and-syllabus/units/mens-health>)
- [Mental health](https://www.racgp.org.au/curriculum-and-syllabus/units/mental-health) (<https://www.racgp.org.au/curriculum-and-syllabus/units/mental-health>)
- [Musculoskeletal presentations](https://www.racgp.org.au/curriculum-and-syllabus/units/musculoskeletal-presentations) (<https://www.racgp.org.au/curriculum-and-syllabus/units/musculoskeletal-presentations>)

- [Neurological presentations \(https://www.racgp.org.au/curriculum-and-syllabus/units/neurological-presentations\)](https://www.racgp.org.au/curriculum-and-syllabus/units/neurological-presentations)
- [Occupational and environmental medicine \(https://www.racgp.org.au/curriculum-and-syllabus/units/occupational-and-environmental-medicine\)](https://www.racgp.org.au/curriculum-and-syllabus/units/occupational-and-environmental-medicine)
- [Pain management \(https://www.racgp.org.au/curriculum-and-syllabus/units/pain-management\)](https://www.racgp.org.au/curriculum-and-syllabus/units/pain-management)
- [Palliative care \(https://www.racgp.org.au/curriculum-and-syllabus/units/palliative-care\)](https://www.racgp.org.au/curriculum-and-syllabus/units/palliative-care)
- [Pregnancy and reproductive health \(https://www.racgp.org.au/curriculum-and-syllabus/units/pregnancy-and-reproductive-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/pregnancy-and-reproductive-health)
- [Respiratory health \(https://www.racgp.org.au/curriculum-and-syllabus/units/respiratory-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/respiratory-health)
- [Sexual health and gender diversity \(https://www.racgp.org.au/curriculum-and-syllabus/units/sexual-health-and-gender-diversity\)](https://www.racgp.org.au/curriculum-and-syllabus/units/sexual-health-and-gender-diversity)
- [Women's health \(https://www.racgp.org.au/curriculum-and-syllabus/units/womens-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/womens-health)

[. \(https://www.racgp.org.au/curriculum-and-syllabus/units/womens-health\)](https://www.racgp.org.au/curriculum-and-syllabus/units/womens-health)