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Alternative or Complementary Medicine, evidence from Portugal

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Objectivos (Objectives): It is becoming more and more common the use of alternative and complementary medicine (CAM). The concept of CAM here is a broad one which complies all modalities of medicine which are not the conventional western medicine, or allopathy (CM), such as natural products, herbes care, homeopathy, osteopathy, phitoterapy, deep-breathing exercises, meditation, chiropractic care, yoga, massage, and diet-based therapies. Portugal has a strong tradition on conventional health care and the National Health System is public and serves the whole population. Nevertheless, the access and use of CAM has been increasing in Europe and so in Portugal too. The reasons for the use of CAM are various: people dissatisfaction and untrust with CM, people need for empowerment over oneself health care and people values and beliefs. Acknowledging all the reasons, an important question is raised: is CAM health care alternative or complementary in the individual decision? This is the main research question of this work. Moreover, there are two other questions to answer: first, how different is the relationship between CAM and CM in the diagnosis and treatment stages, and second, what are the main determinants in the individual choice of CAM?

Metodologia (Methodology): For this purpose, we use the 4th Portuguese National Health Survey, 2005. The questions in this survey allow us to make a distinction between the diagnosis and the treatment once some illness symptoms arise. We then estimate two probits and analyze the determinant variables of choosing CAM in the diagnosis and in the treatment stages. These estimates provide the correlation between the use of CAM and of CM. The theoretical basis of this analysis is the consumer decision economic theory.

Resultados (Results): The main results of this analysis are the following. First, either in the diagnosis or in the treatment, CAM and CM are complementary in the choice of individuals. Second, self-medication also shows complementarity with the choice of CAM treatment. Third, age and education have a non-linear relationship with the choice of CAM. Finally, smoking, chronic diseases and also body mass index are determinant factors in the decision of using CAM.

Conclusões (Conclusions): Our work tries to fill a void on the research of the use of CAM on developed countries. Up to now, little work has been done testing the relationship between CAM and CM, mainly provided by a National Health System, and estimating the determinants of CAM choice. Moreover, nearly no research has been done differentiating CAM from CM in the diagnosis and treatment stages.