



**Consultation and communication  
with complementary medicine  
practitioners by those with chronic  
health conditions:  
An analysis of population- and  
practice-based datasets**

**by Hope Maree Foley**

Thesis submitted in fulfilment of the requirements for  
the degree of

**Doctor of Philosophy (Public Health)**

under the supervision of  
Distinguished Professor Jon Adams and Doctor Amie Steel

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## **CERTIFICATE OF ORIGINAL AUTHORSHIP**

I, Hope Maree Foley, declare that this thesis, is submitted in fulfilment of the requirements for the award of Doctor of Philosophy (Public Health), in the Faculty of Health at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise referenced or acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

This document has not been submitted for qualifications at any other academic institution.

This research is supported by the Australian Government Research Training Program.

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## FORMAT OF THIS THESIS

This thesis is structured in the format of Thesis by Compilation. It presents a single, cohesive body of work comprising a combination of traditional thesis chapters and published/publishable articles. In keeping with the format of Thesis by Compilation, content from articles resulting from the project which have been published or submitted for publication have been embedded within the relevant chapters of this thesis unabridged. Where this applies, a chapter preamble and relevant notes are included to indicate publication details. For published articles, journal-formatted copies of each work are included in the Appendices. A list of these articles and details on authorship contributions are provided below.

## PUBLISHED WORKS INCLUDED IN THIS THESIS

Of the five manuscripts incorporated into this thesis, four have been published or accepted for publication (in press) and one is under review. The manuscripts are as follows:

1. **Chapter 2.3.** Foley H, Steel A, Cramer, H, Wardle J & Adams J. Disclosure of complementary medicine use to medical providers: A systematic review and meta-analysis. *Scientific Reports*. 2019. 9:1
2. **Chapter 4.** Foley H, Steel A, McIntyre E, Harnett J, Sibbritt D, Wardle J & Adams J. Complementary medicine practitioner consultations amongst 1,314 individuals with chronic conditions: Characteristics of users, reasons for and predictors of use. *Complementary Therapies in Clinical Practice*. 2020. 40:101194
3. **Chapter 5.** Foley H, Steel A & Adams J. Consultation with complementary medicine practitioners by individuals with chronic conditions: Characteristics and reasons for consultation in Australian clinical settings. *Health and Social Care in the Community*. 2020. In press.
4. **Chapter 6.** Foley H, Steel A & Adams J. Perceptions of person-centred care amongst individuals with chronic conditions who consult complementary medicine practitioners. *Complementary Therapies in Medicine*. 2020. 52:102518
5. **Chapter 7.** Foley H, Steel A, McIntyre, E, Harnett, J, Sibbritt, D & Adams J. Disclosure of conventional and complementary medicine use to medical doctors and complementary medicine practitioners: A survey of rates and reasons amongst those with chronic conditions. *BMJ Open*. (Under review). *Submitted 18<sup>th</sup> May 2021*.

## **STATEMENT OF CONTRIBUTIONS OF AUTHORS TO CO-AUTHORED WORKS INCLUDED IN THIS THESIS**

As the author of this thesis and candidate for award, I have been the primary author of each article included within this thesis. For each of these articles, I have been principally responsible for determining the research question, performing analysis, drafting the full manuscript, overseeing the submission process and responding to peer-review. Support in all of these areas was provided by my supervisors, Distinguished Professor Jon Adams and Doctor Amie Steel.

During development of the published review article in Chapter 2.3, guidance in the conduct and interpretation of meta-analysis was provided by Associate Professor Holger Cramer, and additional support in interpretation of findings was provided by Professor Jon Wardle. All authors contributed to editing of the finalised manuscript.

Regarding articles published from this project's Phase One data (Chapters 4 and 7), additional support in the planning and interpretation of data analysis was provided by Doctor Erica McIntyre and Professor David Sibbritt. All co-authors for these two works contributed to the design and conduct of the broader project from which Phase One data was drawn, as well as final editing of the associated manuscripts.

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## ABSTRACT

**Background:** Chronic conditions contribute an increasing burden to health systems. The complexity and duration of chronic conditions create substantial challenges for patients and care providers, requiring ongoing, multi-disciplinary, person-centred care (PCC). While evidence suggests high utilisation of complementary medicine (CM) practitioner services by those with chronic conditions, research is limited regarding the role of CM consultations for these individuals. **Methods:** A cross-sectional survey design was employed across two phases at a national population level (Phase One, n=2,019), and a multi-profession CM clinical practice-based setting (Phase Two n=191). Analyses focussed on participants with chronic conditions (Phase One n=1,314, Phase Two n=153). Data were collected on socio-demographics, health status, CM and conventional medicine service utilisation behaviours, and patient communication regarding disclosure of treatment use to CM practitioners and medical doctors. Phase Two also examined patient perceptions of PCC during consultation with CM practitioners as compared with medical doctors. **Results:** Phase One found a substantial rate of CM practitioner consultation by those with chronic conditions (38%) and Phase Two found a high prevalence of chronic conditions amongst those consulting CM practitioners (80%). CM consultation by those with chronic conditions was motivated by a desire for improved wellbeing and supportive, compassionate care, alongside treatment of chronic conditions. Patient perceptions of PCC during CM consultation were consistently high, and were higher than perceptions of PCC during consultation with medical doctors. The Phase One and Phase Two datasets differed regarding rates of disclosure of treatment use to providers. However, the reasons reported for disclosing or not disclosing were similar across both datasets and for all professions; disclosure predominantly related to patient desires to have their health status fully understood, while non-disclosure related to a lack of provider inquiry. Disclosure was found to be associated with higher perceptions of PCC, regarding both CM ( $p=0.0118$ ) and conventional medicine ( $p=0.0033$ ) settings. **Conclusion:** This thesis maps a landscape of the role CM practitioners play for individuals with chronic conditions in Australia by exploring the characteristics, care-seeking and communication behaviours, and perceptions of care of these individuals regarding the CM consultation experience. This thesis describes the context of CM consultation for chronic condition management within the wider field of chronic illness care in Australia, highlighting a need for more pragmatic coordination of care. The results presented here call for further research that considers the potential utility of greater integration of CM in Australia for optimal, PCC for those with chronic conditions.

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