Same River, Different Waters

We are handing over and taking over, respectively, the editorship of our journal *Complementary Medicine Research* (CMR), formerly *Forschende Komplementärmedizin* (FOKOM). This is a good opportunity to look back, gratefully, and to cast a few glances ahead, curiously, speculating, even, about the future of complementary medicine.

Harald Walach

Looking back, I can remember very well when, some time in 1992 or 1993, I found myself, together with Dieter Melchart, Marcella Ullmann, and Peter Jüni, who had arranged the meeting and the initiation of the journal, in Steven Karger's office in Basel. I had never before had the experience of meeting with a renowned international publisher. So, I was appropriately awed. The topic: founding a new journal that would be an outlet for the expected research output of researchers like Dieter Melchart, myself, and others, who became active in complementary medicine research at the time. I was impressed by Steven Karger's saying that he knew this would be a long-haul enterprise, where he, as a publisher, did not expect to make a profit for a long time, perhaps never, but would fund it, because he believed it was important.

This was the starting event for the journal. At the same time, the chair of complementary medicine in Berne, which started as a joint venture of four complementary medicine doctors and researchers, was founded by public vote and gave some backbone to the emerging field. Dieter Melchart had started what became known as the "Münchener Modell," a complementary medicine research facility in Munich, funded by the Bavarian parliament. I had begun researching homeopathy in Freiburg with funding from the Robert-Bosch-Foundation and later from other sources. Shortly afterwards, Reinhard Saller took over the newly founded position of chair of comple-

mentary medicine in Zurich. A short time after that, Malte Bühring, the chair of naturopathy in Berlin, was integrated into the editorial team. Another player right from the beginning was Prof. Stacher, the highly esteemed and well-connected chair of balneology and natural medicine in Vienna, and Prof. Thilo-Körner from Giessen, both of whom have passed away since.

Thus, the journal took off with a preeminently Swiss-Austrian-German point of gravity as the first scholarly outlet for research in the field of complementary medicine worldwide. We had discussions about the language, German or English. If we had started in English, we would have been the first English-language journal. The first issue was published in 1994. The Swiss Society for Phytotherapy was our first stakeholder right from the beginning and is still the scientific society associated with the journal, for which we are very grateful. After all, it is the readers of a journal that provide it with its license to be, not only those who want to publish their research. Right from the beginning, the journal was produced at Karger's Freiburg office with Sibylle Gross, formerly Hopf, being the mater regens with her team of bright and merry ladies and lads until very recently. Sibylle Gross was surely an important driving force in developing the journal.

The year 1999 saw the listing of the journal, 5 years after commencement, in Medline and Index Medicus. And in 2001, I became an Associate Editor, published my first editorial "The Efficacy Paradox" [1], and in 2002 was appointed Editor-in-Chief. Thus, I am looking back on 20 years of service and activity. I have met prominent figures in the field, like Reinhard Saller, the encyclopedically gifted specialist in phytotherapy on the chair in Zurich; or Klaus-Michael Meyer-Abich, former senator of Hamburg and member of our group of Associate Editors. Prof. Meyer-Abich, one of Germany's foremost philosophers of nature and medicine, provided the journal with a further level of reflexivity regarding the foundations.

During my time there, I saw the international rising of complementary and alternative medicine (CAM) research worldwide. Wayne Jonas, one of the first directors of the newly founded Office of Alternative Medicine (OAM) at the National Institutes of Health in Bethesda, Maryland, has been on our Editorial Board even before the office was founded and CAM research started to become a field of interest in the USA. New outlets in the USA were founded, the Consortium of Academic Centers with CAM research came together in the USA, starting conferences there. The International Society of Complementary Medicine Research (ISCMR) was founded in 2003; I was part of the founding association and became its third president after Marja Verhoef and George Lewith. In 2011, Stefan Willich, together with a few others, founded the European Society of Integrative Medicine.

This delineated an important point in history. Up to then, CAM was more or less a countermovement to mainstream thinking in medicine. We were united by the idea that we had solutions for problems that mainstream medicine either created in the first place or could not solve. Large new studies, mainly in acupuncture, but also in other fields, were published in mainstream journals. The huge funding input from the OAM that soon became the National Center for Complementary and Alternative Medicine and then the National Center for Integrative Medicine, in the US, from the insurance companies' "Erprobungsverfahren" in Germany, from the UK, and the Norwegian government's funding of a National Center for Complementary Medicine (NAFKAM), where Frauke Musial is based, made this all possible. This was also a time of conceptual debate. Would CAM simply be embraced by the wide arms of the mainstream medical system and sink into its bosom with all the methods of CAM that were "evidence based" taken in and applied – the vision of "Integrative Medicine"? Or would there still be a necessity to uphold a completely different conceptual view about what illness is, about how cure can be effected, what a human being is, and how therapy works? This is the position of many "whole systems" of medicine, such as Ayurveda, Traditional Chinese Medicine, Tibetan Medicine, or homeopathy, and it is no secret that I have always championed this view [2]. I am passionately convinced that our current medical system, effective as it is in acute situations and illnesses, is deficient theoretically and in dealing with long-term problems. And as long as this is the case, there will always be a small but vocal opposition. If this opposition is silenced and "integrated," which in my view is often shorthand for "colonized and taken over," there will be some other voice that arises. This is clearly visible in the difficulty that well-proven CAM modalities have in being "integrated" in guidelines [3, 4].

The success of CAM research, its spread, and its representation in universities in the form of endowed chairs in Germany, the funding streams that became available by the Carl-und-Veronica-Carstens Stiftung in Germany, however, stalled, as Henning Albrecht, the CEO of this foundation said in the 20 years' anniversary issue of our journal [5]. The university system closed its doors. None of the endowed chairs in Germany were naturalized, except the Swiss ones that had already been naturalized. No public funding initiative in Germany was seen. The economic system rather started to backbite. The "integration" of acupuncture into the public system proved to be not very helpful, as the financial remuneration was small and allowed only for formula-acupuncture. Homeopathy was sidelined. Phytotherapeutic remedies were largely banned from public reimbursement schemes. The success of our research, it seems, engendered envy and backlashes. The emphasis on lifestyle adaptation was hailed by many in the university but largely ignored by the health system, it seems, apart from some small insurance companies. The economic model of our current health system cannot generate new revenues of income by unpatentable, well-known and cheap interventions.

Thus, looking back over 20 years of service in this field, I would say: We were very successful, probably even too successful, and our success proved our defeat. We started with a vision of renewing medical thinking and practice. I still have this vision [6, 7], but I am very skeptical that it can be implemented any time soon. The economic model of health in the West makes the health system part of the economic machinery of growth and, thereby, by default, creates patients instead of agents [8, 9]. This is the exact opposite of empowering people, tapping into their resources, bringing them into contact with their self-efficacy and strengthening their self-healing potential, all those concepts that are part and parcel of a CAM approach.

What lies in store? We do not know. "Hidden is the future before me, I am wondering what my destiny will bring," sings Lensky in Tchaikovsky's opera *Eugen Onegin*, and this is a good description of our current situation, not only in medicine, but also politically. If I have one wish for the future of CAM, for the future of our journal, then it is to keep the fire ablaze and uphold the hope of change that has been at the source of its founding and is still empowering many in the field. The field of medicine, but also the world, needs examples of visions and visionaries. The landscape will change. While the beginning of the field and the journal was a decidedly German-speaking, central European enterprise, we have now seen the extension of the field.

China has entered the scene with enormous manpower, a venerable tradition, and a huge amount of experience, research, and funding. Other countries, Iran for in-

stance, are discovering the sources of traditional medical approaches. It might well be the case that those who forget that the world does not end at the rim of the Mediterranean and of the Atlantic will be left behind [10]. It has always been a decisive element of CAM research that it bridged countries, nations, politics, and worldviews. The ISCMR, Consortium, and European Congress for Integrative Medicine (ECIM) conferences probably had as attendees more researchers from outside Europe and the US than from their host countries. Africa is only slowly beginning to enter the scene. The future will be less Euro- and Western-centric than the beginning of CAM, I am quite sure. The Western model of healthcare and economic growth through single pharmacological inventions is not sustainable worldwide and in the long run, apart from the fact that it is conceptually ill-founded. Thus, our hope very likely lies in broadening our view: thinking about other systems of medicine, other approaches, whole-systems thinking. This is actually very similar to our beginning. Every end is a beginning, every beginning is an end, Oscar Wilde used to say.

After 20 years it is time to hand over. This handing over fits neatly with my personal changes: I am entering pensionable age at 65 in 2022 and will shift my focus from everyday business to other horizons. I am extremely glad that Frauke Musial is taking over. She is a long-term companion on the way and will have her own ideas about the future of the journal and the field.

Frauke Musial

This has not been an easy task, to write this editorial together with Harald Walach. For me, there has never been a *FOKOM* or later on a *CMR* without Harald as Editor-in-Chief. He has always been there since I joined the journal as Associate Editor in 2011. And in fact, I think he has said everything that is to say about this journal's journey from the beginning on. What an impressive story of success! From the first ever scientific journal in the field of CAM published in German to a well-recognized international journal in an ever-growing field of science. Harald Walach has been the captain on this endeavor for the last 20 years, safely steering the journal and its crew through many challenges. I have the highest respect for his achievements for *CMR*. To think that it should be me taking over as Editor-in-Chief fulfills me both with pride as well as with a certain degree of unease. Large footsteps to follow, it will be interesting to observe myself through *my* journey as Editor-in-Chief for the years to come.

Every year I choose guiding words that are supposed to give me strength and trust in the things I do. This year I choose "change, love, confidence, and transformation."

After 20 years of success, the change of an Editor-in-Chief is quite a dramatic step. With regard to *CMR*, I wish to see *change* as a slow but steady process, much like evolution: I wish to keep the good and the successful things, while I would likewise keep the flexibility to adapt to new challenges for the field of complementary medicine and, consequently, for the journal.

I *love* this complicated and sometimes challenging field of research! Many aspects of research and research methodology that are taken for granted in other, more established fields of research are challenged in the field of CAM. I love this challenge, though it needs creativity and thoroughness. I *love* the team around *CMR*: this diverse and creative group of experts, may they serve the journal as Associate Editors, as members of the editorial board, or as the contact persons from Karger. Many of them I have known for almost two decades, some of them I got to know just recently. A diverse group – some are medical doctors, many, like me, come from other disciplines. Dedicated to one goal: to make this journal something good, something to be proud of! I am grateful for this wonderful and dedicated team. It is this team which makes me confident and fosters a firm belief that *CMR* will continue to be a success for the years to come!

There will be the need for *transformations*, too, and this is nothing new for *CMR*. We changed *FOKOM* from a local, German-speaking journal to *CMR*, a truly international scientific journal for complementary medicine. The "market" for scientific journals has been changing quite dramatically over the last decade. We, as the team around this journal, will have to deal with new demands and publishing formats for scientific journals. However, I am confident that this will come naturally and the transition process will be smooth when the time has come.

The journey of *FOKOM* and later of *CMR* was driven by a need for better treatments, especially for chronic diseases, despite tremendous improvements in medicine. More than that, it was inspired by a vision, namely to improve patient care in all aspects of health and disease, including patient safety and even nonmedical factors such as spirituality. Therefore, the major strength of *CMR* is its diversity, intending to cover all fields of CAM as long as the work is scientifically sound and clinically relevant. I find this broadness fundamental and a necessary precondition for following the vision of *CMR*. Consequently, reading through the section "Aims and Scope" of this journal still kindles an unconditional "yes" in me.

I am taking over this journal from Harald Walach with respect, anticipation, and gratefulness for the trust he, *CMR*, and the journal's whole team have shown me. Let's move on and continue this adventure with engagement, confidence, and joy!

Harald Walach
Frauke Musial

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