

Ian D. Coulter awarded the RAND/Samueli Chair in Integrative Medicine

Douglas M. Brown, DC*



Dr. Ian Coulter, PhD
RAND/Samueli Chair in Integrative Medicine

In February 2008, the RAND Corporation and the Samueli Institute announced that they had joined forces to create an endowment to support independent policy research in complementary, alternative and integrative medicine. Months of negotiations produced "The Samueli Institute Fund for Policy Studies in Integrated Medicine at RAND Health." Initial funding was obtained by a \$2 million gift

from Samueli and a \$1 million grant from RAND. These monies are expected to be renewed annually.

Formed in 1946, The RAND Corporation soon became a nonprofit, global policy think tank, providing analysis and solutions to public and private challenges. Working with various governments, private foundations, international and commercial organizations, it is known for rigorous, non-partisan recommendations. The Samueli Institute was established in 2001 by Henry Samueli, and his wife Susan.¹ The motto of this nonprofit, scientific medical research organization is, "Exploring the Science of Healing." Based in Alexandria, VA, its investigations include complementary and alternative medicine, academic and scientific partnerships, as well as military medical research.²

In the Samueli News Release of February 7, 2008, James A. Thomson, President and CEO of RAND states, "Many hospitals and other medical providers are looking to integrate complementary and alternative medical practices into their current treatment systems, but they often are unsure which ones have demonstrated value. This gift will make possible the type of high-quality research needed to answer those questions." In the same News Release, Wayne B. Jonas, President and CEO of the Samueli Corporation concurs. "Currently, patients are left on their own when attempting to integrate complementary and alternative practices with their conventional care. Proper integration requires good evidence and sound policies. This endowment and chair will provide the nation and patients with objective analysis and effective solutions for guiding the health care system and personal care, toward integration."

On October 16, 2008, the Samueli Institute hosted a reception to which the Boards of Directors of RAND and

* 281 Ridgewood Road, Toronto, ON M1C 2X3. Tel: 416-284-1168. Email: browndouglas@rogers.com

Samuel were invited. The purpose of this gathering was twofold: To celebrate the promising entry of the RAND/Samueli collaboration into the arena of Integrative Medicine (IM) research; and to honor Ian D. Coulter, who has been appointed the Samueli Institute Chair in Policy for Integrative Medicine at RAND.

Coulter became seriously interested in complementary and alternative medicine (CAM) in 1976, when he was named project director of the first federally funded study of chiropractic in Canada, conducted under the auspices of the Department of Behavioural Science, University of Toronto. This endeavor resulted in the book, "Chiropractors, Do They Help?"³ In 1981 Coulter became Executive Vice-President of the Canadian Memorial Chiropractic College and served as President, from 1982 to 1991, before being captured by RAND.⁴ Since moving to California in 1991, Coulter has been Director, University of California, Los Angeles/Drew University center for Minority Oral Health; Director, Education Abroad Program, University of California (Australia); Vice President for Integrative Medicine and Clinical Research, Samueli Institute. In addition to his newly acquired duties, Coulter remains a Senior Health Policy Analyst, RAND Corporation; and Professor, School of Dentistry, University of California, Los Angeles and Professor Southern California University of Health Sciences (formally LACC).

In his presentation at the reception, Coulter describes the "enigma" that now exists within the USA health care system.⁵ "We have the most expensive and technologically advanced health care system in the world, yet 40 million people have no insurance, our mortality rates do not match our expenditures and our system kills more patients than many of our diseases." Rather than accepting this depressing situation, Coulter finds that the population began accessing CAM in the 1960's, and now over 50% attend these practitioners.

Initially, CAM and biomedicine did not coexist. "But in the last 20 years a new phenomena has occurred; the emergence of integrated medicine." Coulter has discovered chiropractors practicing in concert with medical doctors in hospitals all over North America. This raises several research questions for sociologists: What is the nature of this integration, does it improve the health of the patients; and does it offer any solutions to the crises facing the health care system?

"So what is integrated medicine?" Coulter attempts to

answer this complex question by describing it in terms of two extremes. At one end IM is close to what is called holistic medicine; restoring the soul to biomedicine. At the other end "it simply means bringing CAM and biomedicine into the same institution in a variety of relationships."

RAND (and Coulter) are intrigued by three features of CAM: first, much of CAM could be called wellness care; second, it embraces the philosophy of vitalism; and third, it embodies chronic care. If IM is a good thing, a number of policy issues must be considered including licensure, insurance coverage, effectiveness, quality, accessibility, appropriateness and nature of care.

Coulter thinks it is obvious why the Samueli Institute and RAND have amalgamated. "The Samueli Institute has already established a reputation and partnerships with institutions doing IM through its program in IM and its program in optimal healing, by building what it calls 'living laboratories.' Within the military it has formed important relationships with IM programs in the United States Department of Veterans' Affairs (VA), as well as military health institutions." For its part, RAND has been an active participant in CAM programs for decades. "In the 1970s its famous health insurance experiment included chiropractic among insured services. Since the 1990s RAND has operated an evidence based practice centre which included a grant from the US National Institute of Health (NIH) to establish a program in CAM. NIH has also funded an evaluation of hospital based IM."

Remarkably, the RAND/Samueli alliance has already produced offspring. RAND is currently doing research for Samueli on grants from the US Department of Defense (DOD) and the Samueli Institute has generously funded the printing of RAND's recently completed five year study of a hospital-based IM, and made it available to those working in this field. The objective of this inquiry is to identify the barriers to, and facilitators of, developing and implementing IM programs. "The study adopted a longitudinal methodology to track the establishment of a single hospital-based IM center. As it turned out, this was also a study of the unexpected demise of the center. Thus, the report tells the story of the center's creation and demise."⁶ This investigation is unique because it documents the life of an IM facility from the womb to the tomb, and should provide cautionary information to those planning to research or create such centers.

Coulter has defined RAND/Samueli as “a marriage made in heaven.” Because of the rapidity with which progeny arrived, some are calling it a “shotgun wedding.” Coulter prefers to think of it as an “abbreviated pregnancy.” Metaphors aside, RAND/Samueli is moving quickly to solidify this merger and take advantage of an opportunity to hopefully improve the quality of health care in America, through integrative medicine.

References

- 1 www.SamueliInstitute.org
- 2 The Samueli Institute 2007 report to the community.
- 3 Kelner M, Hall O, Coulter I. Chiropractors do they help? Toronto, Fitzhenry and Whitesides, 1980.
- 4 Brown DM. Ian Douglass Coulter, PhD: CMCC's adventurous president. JCCA. 2004; 48(1):36–56.
- 5 Coulter ID. The RAND/Samueli chair in integrative medicine. 2008. Unpublished.
- 6 Coulter ID, Ellison MA, Hilton L, Rhodes HJ, Ryan J: Hospital-based integrative medicine: A case study of the barriers and factors facilitating the creation of a center. RAND Corporation, 2008: xv.

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