Madeleen Winkler, general practitioner Gouda, the Netherlands

- Anthroposophic medicine integrated in general practice since 1920
- Dual trained doctors

- GP in NL specialisation
- Patient is practice linked

How comes a GP to his diagnosis?

- 2005: Stolper, Rutten and Dinant
- Experienced GP makes flash diagnosis
- 70 80 % in first 10 seconds
- Pattern recognition



- Dual trained GP
- Dual diagnosis:
 - 1) otitis media, breastcancer, depression
 - 2) AM diagnosis: how are in this individuality in this moment work body, vitality, soul, individuality and social context integrated?

Daily practice:

- 2000 patients inscribed in the practice
- Daily consultations for acute, chronic, palliative, severe somatic, minor ailments and for psychosocial disorders
- Anthroposophic medicines and therapies if desired and possible
- Conventional medicines and interventions when desired or obligatory

Community acquired pneumonia CAP

- 30% bacteria
- 30% virus
- 40% no infectious agent to be found

- Antibiotica
- Patient wish without AB
- Anthroposophic Medical Products and external treatment
- Daily assessment of condition and wish

- Why now pneumonia?
- Wish to change life

- Upper respiratory tract infections
- IPCOSS study
 - Anthroposophic vs. conventional therapy of acute respiratory and ear infections: a prospective outcomes study in Wiener Klinische Wochenschrift 2005, 117
- Less AB, less side effects, more patient satisfection, recovery in shorter time

- Costs:
- Kooremann/Baars

Patients whose GP knows complementary medicine tend to have lower costs and live longer, Eur J Health Econ, May 2011

Patient with cancer

- Referred to hospital for treatment
- His or her own GP integrates mistletoe injections and anthroposophic therapies, giving quality of life improvement as result
- European Journal of Integrative Medicine, <u>June 2010</u>, Orange a.o.

Thank you for your attention

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