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Address by His Royal Highness The Prince of Wales to the Fifty-ninth World Health Assembly

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Monsieur le President, Directeur général par intérim, Mesdames et Messieurs, je vous suis très reconnaissant de m'avoir invité à être parmi vous aujourd'hui, et particulièrement touché que vous ayez souhaité que je m'adresse à une si éminente assemblée de ministres et d'officiels venant de nombreux pays.

Mr President, Acting Director-General, ladies and gentlemen, I am most grateful to have been invited to speak to you today, and touched that you should wish me to address such an eminent group of ministers and officials from around the world.

Before I begin however, I did just want to offer my deepest possible sympathies to the wife and family of Dr Lee at this incredibly sad time and to everyone who knew him. I had been greatly looking forward to meeting Dr Lee once again who incidentally was instrumental in inviting me here today and I was shocked and saddened, as I'm sure you all were, to learn of his untimely passing.

Now, ladies and gentleman. Some of you who have had the doubtful experience of hearing me speak on health care matters in the past may not be surprised to hear me say that my theme today is that of integration. Today's Assembly to some extent represents the very embodiment of integration. But, beyond this room, it seems to me that things are, I am sure you will agree, very different. In many ways, and over rather too long a period, we have maintained a dangerously fragmented and abstracted view of our world which has led to the abandonment of a great deal of valuable traditional knowledge and wisdom. As a result, we are beginning to reap the harvest we have sown through living off Nature's capital rather than her income. I believe, ladies and gentlemen, that there is now a desperately urgent need to redress the fragile, but vital balance between man and Nature through a more integrated approach where the best of the ancient is blended with the best of the modern. I am convinced that this is of increasingly crucial importance when it comes to the collective health of people in all our countries.

Of course none of what I say today should detract in any way from the extraordinary success that modern medicine has achieved, particularly over the course of the twentieth century, in preventing and treating such terrible diseases as smallpox and poliomyelitis. The biophysical model has served us well, and continues to do so, for diseases from tuberculosis to HIV. But at the start of the twenty-first Century we are still challenged by frightening new pathogens threatening to cross the species divide, by the tragedy of natural disasters and the health implications of military conflicts and population migrations. In preventing and controlling such suffering, we must think beyond the practice of reducing everything to component parts, and this is where, I believe, modern medicine needs to accommodate a more integrated and holistic approach.

To my mind, this is even more true in regard to long-term diseases. I have heard them referred to as the “silent epidemic”, but the statistics speak as loudly as those of infectious diseases. According to the World Health Organization, of 58 million annual deaths worldwide, a staggering 35 million are the result of chronic diseases. They are now the major cause of death among adults in almost every country of the world. In the United Kingdom, the Government’s Department of Health has discovered that 80% of all consultations are taken up with chronic complaints, which range from heart disease, stroke and diabetes to depression and addiction.

None of us is immune. And it is vital to be very clear that these conditions are not just diseases of affluence. They belong to rich and poor alike.

I am told, for example, that in Nigeria 35% per cent of women are obese. In China, 160 million people are reported to be hypertensive; while in Asia, cases of diabetes will apparently rise by 90% over the next 20 years. In the United Kingdom, the number of obese children is predicted to double over the next 10 years. Indeed, the Chief Executive of the United Kingdom’s Audit Commission recently said that this alone will lead to a reduction in the overall life expectancy of the next generation of British adults. Not only do these conditions drastically reduce lifespans, but they seriously compromise the quality of many lives as well, causing people to become progressively ill and debilitated. This acceleration in long-term disease, it seems to me, can be seen as the result of fragmented approaches to health which, in turn, fail to produce that apparently most elusive quality, which is harmony.

Ladies and gentlemen, I do believe most strongly that we should not view poor health as something that exists in isolation, but which forms as a direct consequence of our communities, our cultures, our lifestyles and the way we interact with our environments. The state of our health reflects the food we eat, the exercise we take, the water we drink, the air we breathe and the quality of our housing and sanitation. I believe it also extends to our social needs and circumstances – the need to belong to a community, the need for meaningful work and daily purpose. The need in our lives for dignity and kindness, for self-respect, for hope and, above all, for harmony and, dare I say it, beauty. It encompasses the power of art, the healing properties of loving human relationships and the role of the human spirit. Human health is the sum of all these parts. If we reduce or belittle these fundamental elements of life, are we not neglecting what it is to be human?

Yet, too often, we appear to do just that, on a daily basis. The pollution of our environment (in almost every sense) is widespread. As Sir Tom Blundell, the former Chairman of the United Kingdom’s Royal Commission on Environmental Pollution, put it in a report entitled “Chemicals in Products” – “Given our understanding of the way chemicals react with the environment, you could say we are running a gigantic experiment with humans and all other living things as the subject”.

If we poison and pollute our earth, we poison and pollute ourselves. Food colourings and additives can cause a range of health problems in adults and children; hydrogenated fats and unhealthy diets are linked to heart disease and – frighteningly – the residue from pesticides used in conventional farming methods can remain in our bodies for years.

In tackling these issues, I feel we need to be prepared to think radically – and certainly beyond the range of conventional health approaches. I have long felt that we have somehow lost touch with our instinct and intuition for each other, and for our environment. The time has surely come to appreciate that the complexity of chronic diseases requires considered and multidimensional solutions. We must reconsider how we farm our land, how we produce our food, how we build our cities and how we care for our precious natural heritage. In future, for instance, it will not be enough to boast that a new development of houses is merely cost-or fuel-efficient. We must ask: is it human-efficient?

Does it encourage better physical and mental health, satisfaction with life, or help to foster a genuine community? Does it respond to the human need for beauty?

As few long-term diseases are curable, we need also to think radically about our objectives in improving the lifestyles of those who suffer from chronic conditions. The need to prevent deterioration, to maximize the quality of life and the ability of a patient to function, calls for a more holistic approach – one which respects an individual's choices, culture and expectations.

This is where orthodox practice can learn from complementary medicine, the West can learn from the East and new from old traditions. For the past 24 years I have argued that patients should be able to gain the benefit of the “best of both worlds” – complementary and orthodox – as part of an integrated approach to healing. Many of today's complementary therapies are rooted in ancient traditions that intuitively understood the need to maintain balance and harmony with our minds, bodies and the natural world. Much of this knowledge, often based on oral traditions, is sadly being lost yet, orthodox medicine has so much to learn from it. It is tragic, it seems to me – and indeed to many people who have studied this whole area – that in the ceaseless rush to “modernize”, many beneficial approaches, which have been tried and tested and have shown themselves to be effective, have been cast aside because they are deemed to be “old-fashioned” or “irrelevant” to today's needs.

There are clear examples which come to mind, particularly in the fields of acupuncture and herbal medicines. While scientists try to learn more about how acupuncture works, increasingly robust evidence, drawn from a number of international studies, indicates that it does work, particularly for the treatment of conditions such as osteoarthritis of the knee. It can, according to the evidence, also alleviate the nausea and vomiting that can be so debilitating for those taking anticancer drugs.

In the case of herbal applications such as St John's Wort (*Hypericum perforatum*), which has been used since the time of the ancient Greeks, about 30 clinical trials have shown some positive effects in treating non-severe depression, with a remarkably low incidence of side-effects. However, it is perhaps worth pointing out that just at the moment the world begins to realize the immense value of Nature's gift, in the management of our health, the ecological or traditional habitats from which they come are being rapidly destroyed as I speak. And if we are not very careful, we will lose a vital life support system for future generations.

It seems to me, ladies and gentlemen, we all have so much to learn from each other – whether we live in an affluent country or a developing one. Hippocrates said “First, do no harm”. I believe that the proper mix of proven complementary, traditional and modern remedies, which emphasizes the active participation of the patient can help to create a powerful healing force for our world.

In every treatment, the human attributes of compassion, empathy, touch and rapport are as vital to the art of medicine and healing as they are to the essence of humanity. An integrated approach gives each individual the means and hope of contributing to his or her own healing. Integrated practitioners provide time, empathy, hope and reassurance – the so-called “human effect” – which can produce major changes in the immune system. These changes can be demonstrated using brain scans, and provide scientific clues as to how beliefs and emotions can influence our physical health and sense of well-being. The “human effect” can, therefore, play a demonstrably significant role in the whole approach to healing.

In the United Kingdom, my Foundation for Integrated Health has been the leading champion of this integrated approach for the past 11 years. Another of my organizations, the International Business Leaders Forum, has been working with WHO on a number of projects aimed at, amongst other things,

finding ways of improving health through better diets and increasing physical activity, in a number of countries.

My Foundation for Integrated Health has, as part of its approach, encouraged better research and regulation of complementary medicine so that patients can be confident of its safety and effectiveness. I am delighted that FIH. is now also working with the World Health Organization and the King's Fund in London on a new project which has, as its main objective, the aim of examining and exploring different approaches to the regulation of complementary medicine worldwide.

The Foundation also has an awards scheme for integrated projects. I recently visited one in a deprived inner city area which showed how an integrated approach, involving acupuncture and other complementary treatments, appears to have been particularly helpful for patients with mental health problems. Recently, my Foundation has also created an association of clinicians who are developing integrated approaches throughout the United Kingdom. What was once regarded as peripheral is increasingly now seen as mainstream.

Now ladies and gentleman, the question, to my mind, should no longer be whether health-care services should be integrated, but how and how soon it can be done? But you don't just have to take my word for it look at all the indicators that there are around. For example, in the United Kingdom, research in recent years has shown that 50% of general practitioners are referring their patients to complementary practitioners, and, according to BBC television surveys, over 75% of patients would like to have the choice of a complementary as well as an orthodox approach to their problem.

I very much hope that my Foundation will be able to work with and learn from similar organizations in your own countries. Because, as I have said, we all have so much to learn from each other. The humanitarian, theologian and Nobel Peace Prize-winning doctor, Albert Schweitzer, said "The first step in the evolution of ethics is a sense of solidarity with other human beings". The first steps in sharing our integrated solutions are, it seems to me, happening already.

I understand, for instance, that the World Health Organization has been compiling a Global Atlas on the use of traditional, alternative and complementary medicine, something which will be fascinating to see as it develops. It does seem to me that this provides a useful start for planning integrated health approaches across the world. The case of artemesia is a classic example of where real progress can be made. A naturally growing plant, long used in China for treating malaria, artemesia is now a treatment of choice in many parts of the world. I have also heard that it is currently being grown in Africa and that WHO is working to try to ensure that it will eventually become available to all who need it.

I have similarly been made aware of a programme called "*Puente*", an antipoverty programme aimed at the poorest families in Chile. By adopting an holistic approach that nurtures well-being through initiatives in health, employment, housing and education, it appears that this initiative is strengthening the health of families who are struggling to escape from long-term poverty. Meanwhile, in the United Kingdom, what is known as the "Beacon Project" in Falmouth has shown that if you support and empower a deprived community this can help to bring about improvements, including a reduction in the incidence of asthma and postnatal depression as well as a decline in the number of teenage pregnancies.

So ladies and gentlemen, together, we must find creative new ways of developing an integrated approach to health that will encompass nutritional, medical, agricultural, environmental and social policies. In our battle against the complex problems of chronic disease, which could all too easily

overwhelm us in the years to come, and in our efforts to control the global environmental crisis, we need to re-discover and re-integrate some of the knowledge and well-tried practices that have been accumulated over thousands of years.

I can only urge all health ministers, politicians and government representatives in this room today to abandon the conventional mindset that sees health as solely the remit of a health department. In ancient China, the doctor was only paid when the patient was well. In modern health systems, perhaps your visible success should depend on health outcomes and the degree to which health has become the responsibility of every single department in your country's government. Only through collaborative thinking can we paint a complete picture of world healing.

If that is not enough, I would like to leave you with a challenge – if I may.

It seems to me that only through collaborative approaches can we develop the best ideas and the best plans. Therefore, perhaps I could introduce a challenge based on this idea and one which, I hope, will complement the United Nation's Millennium Development Goals. Could I suggest that each country represented here today looks at the possibility, over the next five years say, of developing its own integrated plan for future health and care, perhaps beginning with a pilot or feasibility study? If I may say so, such a plan would reflect your disparate cultures and medical traditions and would recognize the importance of all aspects of the natural environment. It would be a plan that would integrate medical services with individual and community approaches to health and self-care; a plan that might build upon current examples of integrated health and care, which exist everywhere. And if you ever get round to devising such a plan, why not ask your finance ministers to quantify the savings from this new and emphatic focus on prevention as well as cure?

You might be interested to know on that score that last year I commissioned a report in order to encourage a better informed debate about the effectiveness of different therapies and treatments which might eventually result in savings. The report, compiled by a British economist, Christopher Smallwood, was published last October and it found evidence that complementary approaches could help to fill gaps in some orthodox treatments, particularly in relation to many chronic conditions such as lower back pain, osteoarthritis of the knee, stress, anxiety and depression, and post-operative nausea and pain. I am not here to tell you what to do, but I would merely suggest that you might find a similar approach helpful. I very much hope that, in time, some of you might allow me to see what you are achieving.

Ladies and gentlemen, I make these observations with the benefit of having met and talked with people all over the world about health – but, of course, you bring your own considerable expertise and that of your governments to this crucial issue. I can only provide you with a challenge and some ideas – which might perhaps offer a little food for thought in the midst of your deliberations.

I have already said that today's burden of long-term disease is, in part, the legacy of having treated our bodies and our world as a collection of unrelated components. But, of course, it is futile to rue the past. The British Prime Minister, Winston Churchill, once wrote, "Of this I am quite sure: If we open up a quarrel between the past and present, we shall find that we have lost the future". You, if I may say so, are the guardians of that future. And the responsibility lies with us all to understand the complex relationship of human health to our diverse societies, to our modern lifestyles and to our fragile ecosystems.

Centuries ago, Plato said, "The cure of the part should not be attempted without treatment of the whole". Centuries later, the World Health Organization recognized this principle in its

1948 Constitution (incidentally, the year I was born!), when it defined health as a “complete state of physical, mental and social wellbeing”. Today, therefore, is our chance to redefine our health systems so that they provide the balance and connectedness that the twenty-first century so desperately needs.

Ladies and gentlemen, if we nurture the humane, guiding principles of integrated health through combining the best of the ancient, well-tried methods with the rigours of science and the technological imperatives of our age, I believe we will be taking the first bold step in a new vision for the future health care of the world. In that mission, you represent our hope and I wish you every possible success.

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