

Healthcare

Alternative Medicine

While the rising costs of healthcare and the increasing role of health maintenance organizations in its delivery have been subjects of ongoing, vigorous public debate, the insidious dumbing down of American medicine has barely caused a stir. Although this tendency in medicine has not kept pace with the same trend in education, politics, and the mass media, proper medical treatment—at least in primary care—is increasingly being sacrificed in favor of giving the public what it wants.

Among the more conventional, routine examples of this tendency is the unwarranted overprescription of medications, including antibiotics and controlled substances. Overprescription of antibiotics leads to the development of increasingly resistant strains of bacteria, and deaths due to such are projected to be in the tens of thousands over the next two decades. Overprescription of controlled substances, such as painkillers and tranquilizers, leads to drug dependency.

Another example of the dumbing down of American medicine involves the 1992 Congressionally mandated formation, by and within the National Institutes of Health, of what has been renamed the “Office of Alternative Medicine.” The OAM has proved a publicity bonanza for purveyors, both inside and outside “conventional healthcare,” of all manner of dubious “health” products and services. Dr. Larry Dossey, a retired internist associated with the OAM, claims that even conventional medical treatments work at least partly because of ESP and/or prayer: “[The] physician’s thoughts and beliefs [can] actually shape a patient’s physiological responses—at a distance, even when the patient is unaware.” Of course, the book that included this claim—*Healing Words: The Power of Prayer and the Practice of Medicine*—was a national bestseller.

The word “doctor” derives from the Latin word for “teacher.” If “what goes around” indeed “comes around,” the once-esteemed American doctor/physician—now referred to by managed care’s knowledge-neutral term “provider”—may soon devolve further, into the medicine man.

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Recently, a skeptical TV journalist told me he was writing an article about some of the basic philosophical disagreements between alternative medicine and mainstream medicine. He asked me:

“Given that some alternative medical techniques could conceivably be helpful in spite of the bogus theories (energy fields, etc.) typically used to explain them, shouldn’t we ask these questions?” Below are his questions and my replies.

Q: There may be little evidence for the efficacy of some alternative-medicine treatments, but is there much “counter-evidence”? (In particular, have there been major studies of whether the best homeopathy is really no more effective than a placebo?)

A: For which methods and for which claims should we try to determine whether contrary evidence exists? Modes of alternative medicine are legion; claims for individual methods vary according to the particular proponent; and—for reasons that apparently relate more to marketing than to health science—alt-med exponents and practitioners vary methods, the names of methods, and claims for methods (thus making the methods “moving targets”).

Hundreds of systems, methods, and groups of methods are, at least arguably, members of alternative medicine. I have described