

Contemporary Western Medicine has its pitfalls

Denis English^a

^aFlorida Foundation for Research

KEY WORDS

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The newly named editor of Integrative Medicine International, Akshay Anand, asked me to pen an editorial explaining why it is, I think, that practicing physicians in the United States are opposed to the tenants of Integrative Medicine. So I asked one. He replied, "Who's going to pay for it"? Regardless of the name chosen, Integrative Medicine is constantly stung by debate which to a large extent focuses on the question of "how can we afford it"?

After intense study and reflection of arguments both for and against the practice and its development, I have modified the question and instead ask, "How can we not"?

Defined by its own adherents, Integrative Medicine is "The practice of medicine that focuses on the whole person, and makes use of ALL appropriate therapeutic approaches to achieve optimal outcomes". Who can argue against that? Most Physicians in the United States do, as they advance the fact that there is little or no proof that the accepted techniques and therapies of Integrative Medicine are efficacious. If used in place of established Western conventional methods, these methods may result in diminished rather than optimal outcomes. Even if it is used in conjunction with established techniques, methods of Alternative Medicine may compromise treatment results.

But these individuals need to look little further than their own practice before leveling claims of proof of efficacy. While it is true that some of the methods of Western Conventional Medicine are efficacious, this is by no means universal or even particularly wide spread. While some agents of Western Conventional Medicine inarguably hold therapeutic potential, this is by no means universally true.

Thus, insulin, used to relieve diabetes and antibiotics, are particularly effective for treating diabetes and infections, respectively. But are these exceptions rather than the rule? How about, for example, Statins widely prescribed to lower "risk" and "risk factors" that are involved in cardiac disease. Do these liver-toxic drugs hold demonstrable therapeutic potential? Not so much. It turns out that we must treat 67 patients with high levels of these liver-toxic drugs for upwards of 5 years in order to expect to realize a single decrease in a major cardiac event. How many of the other 66 patients are going to experience a major pathologic event related to liver toxicity? Probably quite a few, Statins block essential metabolic events that normally occur in human

liver. Is this a good idea? Yes. Statins markedly decrease circulating levels of cholesterol, a major risk factor of cardiac disease. Pharmaceutical company's avidly then market these drugs as such: Drugs intended for patients at risk for cardiac disease. Drugs that decrease "risk" factors of cardiac disease by 50%, or more. But do these drugs actually decrease cardiac disease? Do the benefits of statin therapy outweigh the risks such that their use leads to "optimal patient outcomes"?

Statins are but one example of the utter failure of Western Contemporary Medicine, as compared to, for example, Traditional Chinese Medicine or Indian Ayurveda. What are we really complaining about? Statins are therapeutically acceptable to practicing physicians in America, why? Because there is a logical, possibly scientifically acceptable link between what these drugs are known to do, and what they are actually used to accomplish? Even if there is not much real evidence to support this putative hypothesis? Actually, there isn't any.

I'm sitting in the house of a friend in the middle of the United States opioid crisis epicenter as I prepare this editorial. Our TV is playing, Stienfield, now a commercial, for ... Xarelta. Here' another great triumph of Western Contemporary Medicine: Xarleta. AKA Aphyxiban, or Xyprexia. They are all the same, Christmas factor (factor X of the blood coagulation cascade) inhibitors. Now this is a wonderful idea. Some patients are at risk for developing thromboembolism, and thromboli, which if dislodged can be quickly lethal. Some scientist came up with a blood clotting inhibitor that works differently from Warfarin, the thrombin inhibitor; or Heparin. It's not as if thrombin and heparin hold proven therapeutic potential to prevent thromboemboli in otherwise untreated individuals. They are efficacious in individuals who have artificial heart valves; individuals at exceptionally elevated risk for cardiac disease due to heroic intervention that perhaps should have been avoided in the first place. But Xarelta, Aphyxiban and Xyprexia aren't marketed (should I say pushed) for treatment of patients who have replacement heart valves, NO. These new drugs which also hold the ambiguous distinction of being the subject of the next major law suit are marketed to prevent clotting in ... in whom? The commercial isn't very clear as to that minor fact. But these drugs are expensive, and since they are going to get prescribed by adherents of Western

Contemporary Medicine, the same adherents that argue so eloquently against Integrative Medicine methods and philosophy.

I reviewed a paper submitted to a major medical journal on the therapeutic utility of use of Xyprexia, just last week. I mention this little fact to illustrate that I am keenly aware not only of published scientific evidence, but even of unpublished results (I soundly rejected that paper). What a crock ... what a crock, this drug is ... in a word. USELESS.

Yet proponents of Western Contemporary Medicine endorse it as they denounce Tai Chi.

I am typing this as I consult with a colleague at her domicile in a nice farm house in central Ohio, in the middle of the US's opioid addiction epicenter. Let me repeat that. In the middle of the United States opioid epicenter, in rural Ohio, near the famed Wright Patterson Air Force Base, just east of Dayton. In this community, 2 people die of opioid overdoses every day. Every damn day, In my country, the opioid epidemic is a calamity

that takes as many lives in the USA every three weeks as did the terrorist attack on New York City on September 11, 2001, over 6000, or upwards of 80,000 lives a year. Needlessly taken by overuse of prescription opioids such as those accepted and willingly prescribed by practitioners of Western Contemporary Medicine, many of whom abhor the tenants of Integrative Medicine. If these individuals had prescribed Yoga, acupuncture, hypnosis, or music therapy instead of Percocet and Vicodin to improve their patients' pain tolerance, perhaps this crisis could have been avoided.

But xarelta, which inhibits blood clotting ... Avirostatin, or whatever, which inhibits essential liver function enzymes are wonder drugs of Contemporary Medicine. Think again Den ... Think again ...

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