From the Kitchen

21 December 2011

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As I pointed out in an earlier post, no practising doctor has the time to keep up with the amount of material published in medical journals. It is thus very difficult for doctors to keep up with the latest research. Couple with this the suggestion made by many that much of the research is skewed to obtaining the results which the pharmaceutical industry wants, and that pharmaceutical drugs are tested for statistical results, and it is little wonder that individually tailored treatment is difficult.

The growing complexity of medicine and the need to make ever greater profits, militate against the needs of individuals. While there are still doctors who are truly healers and who will in all cases seek the best treatment for each patient, many people who need medical assistance are no longer seen as individuals.

When someone is ill, they 'present' with symptoms – the outward manifestation of what is going on. Healing is possible only if whatever is causing those symptoms is addresses. However, in much of modern medicine the treatment is for the symptoms only and the causes may be ignored completely. The result is often that something which could be treated effectively in its early manifestations becomes chronic, and the medicines given to deal with the symptoms have to become increasingly powerful and, often, nasty.

Films sometimes make light of the approach in hospitals, when patients are not referred to as people, but as symptoms. "The liver in bed five", "the stroke in room twelve" are examples of this. That this is used as comedy in films indicates that it is happening frequently in real life. When did these people stop being important?

Several films have sought to bring attention to the iniquity of this attitude. One such was *The Doctor*, starring William Hurt.¹ A doctor who works in a hospital and shows all the impersonal attitudes I mentioned above, becomes seriously ill and discovers first-hand how his hospital deals with patients. On recovery, he institutes changes to teach the hospital doctors to treat patients with more compassion and humanity.

There is also a growing group of doctors who are using non-pharmaceutical medicines to tailor treatments to each individual patient in a way that deals with the underlying causes of their symptoms. They will work *with* each patient and they expect each patient to be fully involved in the process. The individual is honoured by this approach. The individual is treated as being important.

One reason so many people opt to go to naturopaths and other 'natural' therapists, is that *they* routinely tailor their treatments to the individual's needs and they are more interested in identifying and dealing with causes than alleviating symptoms. Also, a patient's history is more important to these therapists than it is to most doctors. As a result, patients feel more listened to and, therefore, more valued and, as a result feel more involved.

To move away from medicine, let me look at the area of the individual in society.

There has been a growing trend to restrict individual rights and freedoms in the name of protecting us from terrorists and other criminals. There has been little debate about the need for this or, if there is a need, about how we can best be protected. The easy options are usually chosen by governments and these result in the individual losing something important.²

How important to you are the freedoms you have? What about freedoms you used to have and which have been restricted or taken away completely? What freedoms do think you should have, that are not there?

How concerned are you about the level of criminal activity in your community? Is your concern high enough that you are willing to have your freedoms curtailed? Is your concern in line with actual crime rates?

[to be concluded in the next post]

- 1. The Doctor, 1991, Silver Screen, USA
- 2. In *<u>The Quest for Justice</u>* (Scribe, 2010), former judge Ken Crispin devotes a whole chapter to this issue.