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The Herbalist’s Corner

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THE FAILURE OF WESTERN MEDICINE, THE PROMISE OF EASTERN MEDICINE

I would like to put Western medicine into perspective. The training focuses on hospitalized patients, and the profession’s greatest successes lie in saving life and limb: fighting serious infection, severe trauma, and life-threatening deterioration of major organs. When a patient needs to be hospitalized, Western diagnostics, surgery and pharmaceutical medicine proves to be almost miraculous and we, as a society, have benefited from this knowledge and application. No one would discount its remarkable effectiveness, compared with 150 years ago.

Modern medical science does not come without a high price tag. The typical medical graduate has accumulated, after four years of college and four years of medical school, debts between \$250,000 to \$300,000¹ They are driven to repay these debts, and the best and brightest gravitate to higher-paying specialties such as orthopedics, surgery, dermatology, gastrointestinal, endocrinology, etc. Specialists routinely charge \$100 to \$500 per visit, (although insurance companies end up paying less), and the cost of medical visits are the first factor in why medical expenses are so high.

Specialties require advanced diagnostic technology, such as X-ray, CT scan, MRI, and specialized blood tests. A contrast CT scan, without insurance, for example, costs \$3000. Hospitalizations are astronomically expensive in the United States, compared to countries such as France or Japan.

Also driving medical costs are the price of pharmaceutical medicines. The newer drugs cost more than \$100 for a month’s supply. As people age, they find themselves

¹ http://www.sourceamerica.net/source_america_solutions.html

on more and more pharmaceuticals, and for the elderly on Medicare, these costs come out of pocket.²

The outcome for American residents is an unaffordable health care system. Prices are driven by either necessity (for the primary care physician or hospital) or outright avarice (specialists, insurance companies and the pharmaceutical industry.) Politicians, the public, and, finally, the medical profession, are now acknowledging a crisis situation, and wish to address it. In the national talk of correcting the situation, attention has focused on cost, availability and accessibility.

The situation that is not being addressed in any national discussion, however, also needs to be heard. Western medicine as it is practiced today, outside of hospital crisis intervention, has become a therapy of expensive pharmaceutical medicines, and these medicines are an abject failure. They do not cure illness and they do not promote health. In fact, they typically weaken one's health or lead to a decline in quality of life. Data analysis has shown that Western medicine is one of the leading causes of death in this country.³

I want to be very careful how I address this issue, so as not to offend medical friends or readers. The earnest physician is not at fault here; he or she has become a pawn of the pharmaceutical industry, which aggressively belittles safer and effective natural alternatives while spending large amounts of money promoting their drugs to physician and public alike.

² "Medicare drug spending increased by nearly 72 percent between 1997 and 2001 when adjusted for inflation. The surge was primarily driven by a 26 percent escalation in the average prescription price and a nearly 24 percent growth in the average number of medications used per beneficiary." Moeller, J.F., Miller, G.E., and Banthin, J.S. (2004, September-October). "Looking inside the Nation's medicine cabinet: Trends in outpatient drug spending by Medicare beneficiaries, 1997 and 2001." *Health Affairs* 23(5), pp. 217-225.

³ "The total number of iatrogenic [induced inadvertently by a physician or surgeon or by medical treatment or diagnostic procedures] deaths is 783,936. The 2001 heart disease annual death rate is 699,697; the annual cancer death rate is 553,251. It is evident that the American medical system is the leading cause of death and injury in the United States."

Gary Null PhD, Carolyn Dean MD ND, Martin Feldman MD, Debora Rasio MD, Dorothy Smith PhD. <http://ourcivilisation.com/medicine/usamed.htm>

The problem with Western pharmaceuticals, compared to herbal therapies, is that they rarely cure the illness. How do I know? Because when you stop the medicine, the patient still has the problem. Think of the following conditions: thyroid, diabetes type 2, acid reflux, asthma, osteoporosis, hypertension, depression, insomnia, seasonal allergies, headaches. When the medicine is discontinued, even after years of use, the problem is still there. And there are numerous conditions where the medicine does not work at all, but are promoted anyway: eczema, ear infections, cough, irritable bowel syndrome, memory loss and dementia, Parkinson's, multiple sclerosis, and late-stage chemotherapy.

The demands of a busy outpatient clinic afford the Western practitioner a limited time to evaluate the patient, and he or she decides quickly which problem to prioritize. I think it is obvious that the general practitioner chooses from an arsenal of 13 or 14 types of medicines, and everyone who walks in their door gets one of them. (The list: antacid, antidepressive, antihistamine, pain medicine, steroid, albuterol and/or steroid inhaler, antibiotic, statin, sedative, antihypertension, estrogen, birth control pills, and a steroid cream.) If I were a typical medical doctor – well-trained and intelligent – I would blanch at the intellectual restrictiveness of this practice, and at the mechanical lifestyle one's practice has become: 4-6 patients an hour, each getting a prescription from a list of 14 medicines, without time for an in-depth interview, patient counseling, or any real detective work.

This approach to medicine is failing the public. It is mechanical, dishonest, and ultimately harmful. When we look at Chinese herbal medicine, we see something very different. We see a medicine based on an old and deep understanding of how the human body works, and we choose medicinal herbs that allow correction and healing without side effect. The herbal medicines are less expensive. As the American public critically evaluates the limits of Western medicine in its accessibility and affordability, we should also take a hard look at how Chinese herbal medicine could benefit society, both in cost and effectiveness.

This requires government-sponsored research to evaluate Chinese herbal medicines for safety and efficacy, on its own merits, and at a much greater clip than the 10 or so studies that NIH authorizes per year. This does not mean dissecting and analyzing Chinese herbs for chemical properties that "explain" its mechanisms to an entrenched scientific mind-set. It means evaluating the efficacy of Chinese herbal formulas for the

treatment of disease compared to existing medical protocols. For example, it is common for Western doctors to prescribe antibiotics for urinary tract infection. A simple comparison of the use of *Ba Zheng Wan* against the standard antibiotic would no doubt show that the herbal formula is at least as effective as the antibiotic, and may even be more effective.⁴ The advantage of proving *Ba Zheng Wan* would then encourage medical doctors, as well as the self-medicating public, to utilize an effective herbal medicine that does not carry the burden of encouraging “super bugs” or destroying essential gut flora that impacts the immune system.⁵

Scientists and medical doctors worry about several issues surrounding herbal medicines. One is the safety issue – are they contaminated? Are they safe? The question of contamination can be resolved by requiring GMP (Good Manufacturing Practice) levels on product production. The question of safety can be settled by using standard animal (mouse/rat) studies to determine toxicity, a relatively quick and inexpensive protocol.⁶

The other concern has been on the need for standardization of herbal products, that each herbal ingredient is extracted with consistent percentages of active ingredients. The medical world believes that clinical efficacy can only be researched with bio-identical formulas. I believe that this is a scientific conceit that would only add unnecessary cost to Chinese herbal products without significantly improving outcomes. Chinese herbs have latitude in potency, and what is really important are the relative ingredient percentages of raw herbs in a combined formula.

The Western scientific community would like to evaluate medicinal herbs along the same lines as pharmaceuticals, but this is really unnecessary, and costly. France and much of Europe have accepted this reality, calling herbs “*la médecine douce*”, or the

⁴ It would not be necessary to compare the Chinese herbal formula against a placebo, because the antibiotic will have already been tested against a placebo.

⁵ See *Alternative Medicine for Children, The Consequences of Antibiotics*.
<http://drjakefratkin.com/pdf/amc.pdf>

⁶ Presently, the Food and Drug Administration (FDA) will not allow scientific studies on herbal products, because they would then be labeled as drugs, not supplements, as defined in the DSHEA act, and the manufacturer/distributor would be “violating” that agreement. A new category is required, somewhere between “food supplement” and “drug”, which would include medicinal herbs, and allow for dissemination of scientific research and studies.

gentle medicine. Because they don't pose the health risks that pharmaceuticals do, they do not need the high research standards set for potentially dangerous pharmaceuticals. Many French medical doctors are comfortable in recommending (European) herbal medicines and homeopathics, which are available in pharmacies. They do so because they are comfortable with its safety.⁷ What is important, in our modern medical crisis, is access to herbal formulas that have been tested for safety and efficacy along the lines I mentioned above, not trying to validate them from the same parameters applied to pharmaceuticals.

The American medical establishment is shooting itself in the foot by criticizing, demeaning, or restricting the free flow of herbal medicines to the public. Chinese herbal medicines are more effective than Western medicines for common conditions: acid reflux, depression, anxiety, insomnia, asthma, infections, menstrual disorders, constipation, inflammation, etc. And in certain medical conditions Chinese herbal medicines are without competition: the dissolution of kidney stones, viral infections (upper respiratory infections, cough, herpes simplex, shingles), menstrual irregularity, ovarian cysts, etc. In several areas, herbal medicines are so effective that the economic impact of using them would dramatically reduce overall medical costs: common viral and bacterial infections, digestive problems such as acid reflux, control of liver degeneration in Hepatitis C, infertility, and combined treatment (with chemotherapy) for cancer.⁸

As Western medical doctors gravitate towards the higher-paying specialties, the primary-care providers will be nurse practitioners and physician assistants. We should add practitioners of Oriental Medicine, chiropractors and naturopaths to these gatekeeper positions, who can refer to medical specialists for advanced diagnostics or therapies. Those patients preferring natural medicine for common ailments will have society's approval, and overall costs for health care will actually go down. Our profession needs to work vigorously to educate the general public and government agencies about the cost and efficacy benefits of bringing Chinese herbal products into mainstream health care.

⁷ No deaths or injuries have been reported with any GMP Chinese herbal product in the United States, despite the fact that Chinese herbs have been dispensed since 1980 among 15,000 acupuncture practitioners.

⁸ See Tai Lahans, *Integrating Conventional And Chinese Medicine In Cancer Care, A Clinical Guide* (Churchill Livingstone Elsevier, 2007).