Western medicine, brilliant and advanced in diagnosis and crisis management, seems to limit itself in therapeutic choices for common illnesses and injury. This is due to an over-reliance in pharmaceutical medicine, whose choices are small, expensive, and often with side effects. Western doctors are hesitant to try or prescribe natural medicine alternatives, due to lack of training and fear of reproach from their fellow doctors.

Let’s compare this to the situation in France or Germany. In those countries, only medical doctors may prescribe medicines of any type. Yet 50% of the doctors include some form of natural medicine in their practice, choosing from homeopathy, western herbs or acupuncture. A graduate of a medical school is considered trained and independent, and may pursue a variety of healing therapies. Many practitioners are proud to be “village doctors”, caring for families from cradle to grave. They are open to therapies that work, without side effect, based on their own clinical experience and observation rather than hard scientific evidence. This is not to say that they ignore or belittle science, but they are willing to use medicines without the hard evidence if it appears useful and not dangerous. They call these “soft medicines” as opposed to pharmaceutical drugs.

In China, the availability of natural medicine is dramatic. With a population of 1.2 billion, 40% of the people use clinics or hospitals that are strictly Traditional Chinese Medicine – herbal medicine, acupuncture or massage-manipulation. Imagine a health care delivery system for 480 million people using only herbs and acupuncture! The Beijing hospital where I studied had 1500 outpatients every morning, each prescribed Chinese herbs.

In the United States, there exist health care professionals offering therapeutic alternatives for pediatric conditions. We have practitioners of Oriental medicine, like myself, who prescribe Chinese herbal pills and tinctures and provide pediatric acupuncture treatments. Naturopathic physicians prescribe homeopathic medicines, western herbs, and nutritional medicine, and chiropractors offer spinal manipulation and nutritional support. Also, more and more western medical doctors are studying and prescribing “soft medicine”. All of these offer benefit to children in acute and chronic conditions, and I encourage parents to develop a relationship with a practitioner of alternative medicine having an expertise in pediatric treatment.
Does this mean abandoning your conventional pediatrician? Absolutely not. Western doctors are still the best trained in both well-child assessment and as the gate-keepers for assessing serious conditions that may require medical specialization or hospitalization. Western doctors have more training than practitioners of alternative medicine, namely seven years, versus the four years of naturopathic or chiropractic physicians, or the three years of an acupuncturist. (Some acupuncturists will pursue one to four years of postgraduate training).

The Consequences of Antibiotics

Despite the advanced training of western medical doctors, I have a concern with the over reliance on pharmaceutical drugs, even for benign conditions. There is an overuse particularly of antibiotics, which is given for all infections affecting the ear, throat, lungs, urinary tract, skin or gums. Clearly, 80% of these infections are viral in nature, and antibiotics are not destroying the real viral pathogen. Antibiotics provide relief of symptoms in many viral infections, including inflammation, phlegm production, and malaise, because they inhibit white blood cell activity which triggers these natural responses. However, by inhibiting white blood cell production, they lower the body’s natural immune response.

There are three serious consequences of overuse of antibiotics. The first, recognized by western medicine, is the mutation of bacteria into drug resistant offspring. When you hear of “super-bacteria” in the media, it means that there are bacteria impervious to all of the known antibiotics. Science keeps searching for new and stronger antibiotics, although researchers know that these too will become obsolete in a short time. The rampant application of antibiotics, both through medicines and more importantly through the food chain (chicken, beef, eggs, milk and dairy products) are potentially creating mutant pathogenic bacteria that can seriously affect the health of our whole population.
The second consequence, unacknowledged by the typical doctor, is the damage done by antibiotics to the body’s overall health. We have about five hundred different species of beneficial bacteria in our small and large intestines. These bacteria do the lion’s share of digesting toxins that the liver dumps from the blood, neutralizing the caustic effects of secreted bile, and providing enzymatic cofactors so that beneficial nutrients from food can be absorbed across the small intestine wall and into the blood. When we take antibiotics for a pathogenic microbe, we destroy all of the beneficial bacteria of the intestines. By doing so, we actually become malnourished because we cannot efficiently transport nutrients into our blood. This happens no matter how nutritious our food is or how many vitamins we take.

As for bile, it is a necessary substance to detoxify poisons in the liver and acts as a lubricant to carry poisons out of the liver and into the small intestine. Good bacteria converts the bile into harmless salts, but without these bacteria, bile is caustic and irritating to the large intestine lining. Chronic use of antibiotics, I think, is a contributing factor to our modern epidemic of colon cancer.

The third consequence, unaccepted by the typical doctor, is the damage caused by the growth of the fungus Candida Albicans following antibiotic use. Antibiotics not only clear beneficial bacteria from the intestines, but they change the pH, providing a cool alkaline environment conducive to fungal growth. Candida grows rapidly and inhibits the re-establishment of beneficial bacteria. The problem with Candida, besides inhibiting the growth of beneficial bacteria, is the secretion of a chemical aldehyde which irritates and ruptures the cells lining the small intestine. This slowly but surely lowers the immune response in the intestinal mucus, and allows infiltration of toxins into the blood stream. This has come to be known as Leaky Gut Syndrome, and significantly affects the body’s immunity.

Studies in northern Europe have shown that children who have taken antibiotics for an ear infection have a three-fold increase in a second ear infection within six weeks than children who did not take antibiotics. They also found that children who take antibiotics versus children who have not taken antibiotics for ear infection have the same rate of recovery, and subsequently have recommended that children not be given antibiotics for ear infection.

Leaky gut syndrome, a direct consequence of antibiotics causing Candida growth, is responsible for a steady infiltration of toxins back into the body. I believe that it is a significant contributing factor to asthma, chronic allergies and chronic infections. I also believe it leads to food allergies, because foods are absorbed before they are completely digested, and are “tagged” as foreign by the body’s immune system.
Doctors minimize the consequences of Candida growth by saying that all people carry Candida, but not all people are ill. This is because doctors do not utilize lab tests that quantify the amount of Candida in the intestines. Low levels are insignificant, but higher levels are associated with obvious symptoms of illness. Unfortunately, there are only three or four labs in the country willing to do an accurate Candida count.

Where does this lead? Do we deny ourselves antibiotics under all conditions? Are we to avoid treatment for common pediatric infections? The answer to both of these questions is no. Antibiotics are an important medicine in the healing arsenal, but given their consequence they should be recognized as heavy-duty. I consider antibiotics to be a hospital-level medicine for a bacterial infection has entered the bloodstream, the bone, the spinal cord, or organs such as the heart or kidney. It usually exhibits high fever, and these cases need to be hospitalized. Antibiotics are also necessary in open wound trauma and following surgery.

Most pediatric cases routinely given antibiotics involve the epithelia (open skin-type tissue) for the throat, ear, sinuses, lungs, skin, and urinary tract. In my clinical experience, Chinese herbal medicines in pill or powder form are effective for the viral or bacterial infections affecting these areas. Western herbs and homeopathics can also be effective. When possible, consulting a trained practitioner is the best course, but significant relief and control in mild or early cases can happen with self-medication from the shelves of the natural food stores.

In the next issue, I will conclude this article with a guide and description of available Chinese herbal products for common viral and bacterial infections.

JAKE PAUL FRATKIN, OMD is a Doctor of Oriental Medicine in practice since 1978. After seven years basic training in acupuncture and Chinese herbal medicine in this country, he went to Beijing and did eight months advanced hospital training in pediatrics and internal medicine. He is the author of CHINESE HERBAL PATENT FORMULAS, 1987, and is at work completing two volumes on 900 available Chinese patent medicines. This year he received a national award as Acupuncturist of the Year from the American Association of Oriental Medicine.