The current healthcare debate has brought up basic questions about how medicine should work. On one hand we have the medical establishment, with its enormous cadre of M.D.s, medical schools, Big Pharma, and incredibly expensive hospital care. On the other, we have the semi-condoned field of alternative medicine that attracts millions of patients a year and embraces literally thousands of treatment modalities not taught in medical school.

One side, mainstream medicine, promotes the notion that it alone should be considered “real” medicine, but more and more this claim is being exposed as an officially sanctioned myth. When scientific minds turn to tackling the complex business of healing the sick, they simultaneously warn us that it’s dangerous and foolish to look at integrative medicine, complementary and alternative medicine, or—God forbid—indigenous medicine for answers. Because these other modalities are enormously popular, mainstream medicine has made a few grudging concessions to the placebo effect, natural herbal remedies, and acupuncture over the years. But M.D.s are still taught that other approaches are risky and inferior to their own training. They insist, year after year, that all we need are science-based procedures and the huge spectrum of drugs upon which modern medicine depends.
The Mythology of Science-Based Medicine

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We are not suggesting that Americans adopt any and all alternative practices simply because they are alternative. These, too, must demonstrate their effectiveness through objective testing.

We all marvel at the technological advances in materials and techniques that allow doctors to perform procedures that once were the stuff of science fiction. However, it is important to remember that these advances are not without their risks. The truth is, many conventional medical treatments are based on assumptions rather than evidence.

According to the Congressional Office of Technology Assessment, only 10 to 20 percent of the treatments that are commonly used by physicians are scientifically validated. This is a disturbing statistic, considering the amount of money that is spent on healthcare each year.

In 2005, the Centers for Disease Control and Prevention reported that out of the 2.4 billion prescriptions written by doctors annually, 118 million were for antidepressants. Antidepressants are the number-one prescribed medication, and their use has doubled in the last 10 years. You would think, therefore, that a remarkable endorsement is being offered for the efficacy of these medications.

However, there are concerns about the effectiveness of antidepressants. In 1998, Dr. Barbara Starfield, writing in the Journal of the American Medical Association, estimated that between 225,000 and 284,000 deaths occur each year in the U.S. due to iatrogenic causes, or physician-related errors. This is the third leading cause of death for all Americans.

It is estimated that 2.5 million unnecessary surgeries are performed each year. As quoted by President Obama in his drive to bring down medical costs, $700 billion is spent annually on unnecessary tests and procedures in America. As part of this excess, it is estimated that a million unnecessary surgeries are performed each year.

The sad fact is that a disturbing percentage of the medicine we subject ourselves to isn't based on hard science, and another percentage of it is risky or outright harmful.

You have a right to be shocked by these findings, and by the overall picture of a system that is based on the illusion of effectiveness. We are not suggesting that Americans adopt any and all alternative practices simply because they are alternative. These, too, must demonstrate their effectiveness through objective testing.

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Congressional Office of Technology Assessment determined that a mere 10 to 20 percent of the practices and treatments used by physicians is scientifically validated. It's sobering to compare this number to the chances that a patient will receive benefit due to the placebo effect, which is 23 percent.

This left the largest category at 46 percent as unknown in their effectiveness. In other words, when you take your sick child to the hospital or clinic, there is only a 36 percent chance that he will receive a treatment that has been scientifically demonstrated to be either beneficial or likely to be beneficial. This is remarkably similar to the results Dr. Brian Berman found in his analysis of completed Cochrane reviews of conventional medical practice. There, 62 percent of treatments were positive and 38 percent were either negative or showed "no evidence of efficacy." For those who have been paying attention, this is not news.

Back in the late '70s, the US Preventive Services Task Force published a report in which they concluded that the evidence for the benefit of aspirin in the prevention of cardiovascular disease was "insufficient." The recommendation was that the use of aspirin for this purpose be discontinued. However, the practice of prescribing aspirin for this purpose continued, and the results were disastrous.

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