

Medical Error and Medical Truth: The Placebo Effect and Room for Choice in Ayurveda

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For NCCU, Taipei
May 26, 2011

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Ayurveda

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- Early systematic conceptualization around the time of the Buddha (ca 400)
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- Rational medicine, based on humoral balance and herbal therapies.
- Modernization and globalization.

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MEM

- MEM – “Modern Establishment Medicine”



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Moerman

- Moerman, Daniel E. (1979). “Anthropology of Symbolic Healing.” *Current Anthropology*, **20(1)**, 59–80.

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- “Placebo” → “**Meaning Effect.**”
- → *the recovery of patients by whatever means.*



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Illich

- Illich, Ivan (1976). *Limits to Medicine: Medical Nemesis: The Expropriation of Health*. London: Penguin.

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Illich

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The medical establishment has become a major threat to health. The disabling impact of professional control over medicine has reached the proportions of an epidemic.



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Iatrogenic disease

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- Ciba-Geigy's Clioquinol.



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The limits of medicine

- Only 15% of biomedical interventions are supported by solid scientific evidence.
 - Editor of the *British Medical Journal*, 1995.



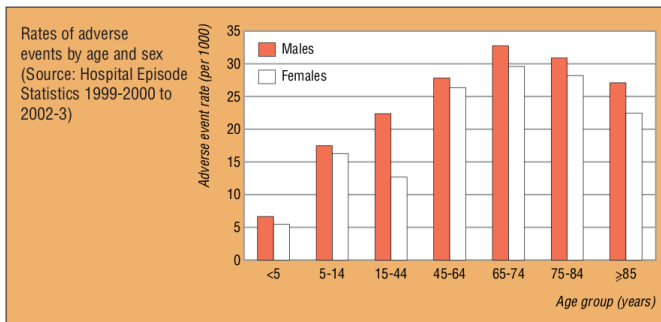
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Dr Foster's case notes

How often are adverse events reported in English hospital statistics?

About 850 000 medical errors occur in NHS hospitals every year, resulting in 40 000 deaths.¹ In the United Kingdom, the National Patient Safety Agency (NPSA) was created to learn from patient safety incidents occurring in the NHS.² In February 2004, it launched a new patient reporting system, drawing together reports of patient safety errors and systems failures provided by health professionals across England and Wales.³ An adverse event can be defined as "an unintended injury caused by medical management rather than a disease process, resulting in death, life threatening illness, disability at the time of discharge, admission to hospital, or prolongation of hospital stay."⁴ A medical or surgical misadventure is an adverse event that might have been avoided if the patient



different groups and the length of time people are in hospital. Other studies have found overall rates of 0.97%⁵ and 36%⁶ but a study using routine hospital data in Australia found a rate of 4.75%.⁷ Studies using routine data tend to have lower estimates than those based on casenote

Episodes of care (number (rate per 1000)) with mention of adverse events and misadventure. Source: Hospital Episode Statistics 1999-2000 to 2002-3

Category	Adverse events*	Misadventure†
Admission method:		
Emergency	500 (10.0%)	400 (8.0%)



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The limits of medicine

- Only 15% of biomedical interventions are supported by solid scientific evidence.
- About 850,000 medical errors occur in NHS hospitals every year, resulting in 40,000 deaths,
- but only 4000 misadventures are reported per annum, and
- only 2.2% of all hospital episodes contain any mention of an adverse event.



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Illich again

- Illich, Ivan (1976). *Limits to Medicine: Medical Nemesis: The Expropriation of Health*. London: Penguin

...the insistence of the medical guild on its unique qualifications to cure medicine itself is based on an illusion. Professional power is the result of a political delegation of autonomous authority to the health occupations which was enacted during our [20th] century by other sectors of the university-trained bourgeoisie: it cannot now be revoked by those who conceded it; it can only be de-legitimized by popular agreement about the malignancy of this power.



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Some thoughts towards a new model of medicine

- Plural medicine.
- Unprejudiced, evidence-based focus on healing and recovery.
- Rethinking the **meaning effect** as an integral part of healing.
- Depoliticization of MEM.
- Flattening of hierarchies in MEM.
- Scientific humility concerning the explanatory models of therapies.



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