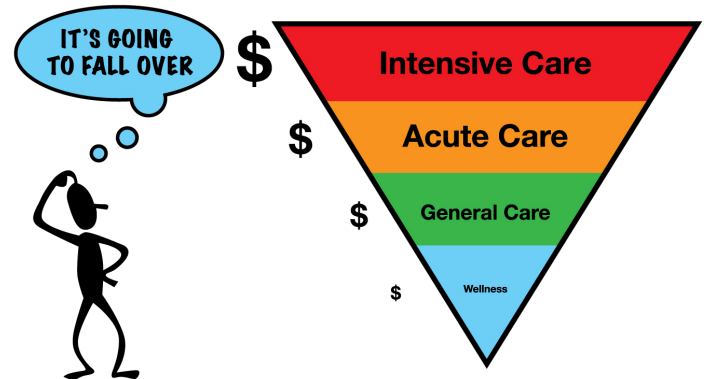


WHAT DO YOU KNOW ABOUT OUR HEALTH SYSTEM?

By John Appleton

With the election looming, political parties are trying to woo us with their ideas about how best to 'run' our little country. It is surprising (certainly to me anyway) that of all the issues to come to the fore this time, health seems to be way down the list. Health is however the most important issue for every one of us. All the wealth in the world is of no use if we haven't got our health.

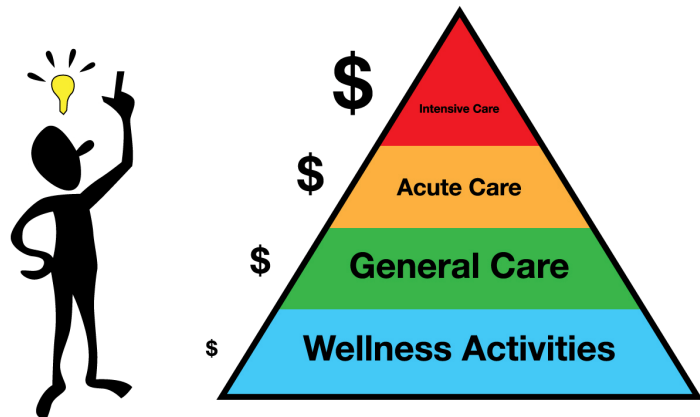
Despite a doubling of expenditure on 'health' from \$6 billion in 1998 to \$12 billion in 2008 the waiting lists for surgery grow, patients are sleeping in hospital corridors and demand for health care services is outstripping our ability to keep paying. Any sage observer could be forgiven for wondering if it is our health system itself that is sick. The reason that our hospitals are filled to overflowing is that we seem to have ever increasing numbers of sick people.



Current health system

Quite plainly if our objective by spending \$33 million every day is to have a healthier nation, the statistics certainly don't suggest that we are even close to achieving this objective. The problem is that instead of promoting health and everything that is involved with keeping people out of the health system, we keep pouring money into the treatment of sickness. As many a Grandma said '*an ounce of prevention is worth more than a pound of cure*'. Currently we

are spending \$12 billion + on the 'cure' side of the ledger and almost nothing on prevention. Rather than a health care system, what we have is in reality a disease care system. We have charities tirelessly raising money to find cures for cancer, arthritis, diabetes and heart disease (focused mainly on drug development) but there is also a need to have cancer, arthritis and diabetes prevention societies, organizations that would look specifically into the causes of the diseases that they take their names from. Organizations that would be independent of big business which would publish the research that shows how exposure to environmental toxins, chemicals, radiation and poor food choices precipitate the processes that lead to disease.



A stable health system

Years of study and reading of the medical literature has convinced me that the goal of having a healthier nation will continue to elude us until we implement preventive measures and we give people the freedom to choose the type of health care that they want. This would necessitate allowing doctors to use treatment options that they believe would achieve the best outcomes for their patients.

The Declaration of Helsinki 1964 (of the World Medical Organisation) states *"It is the mission of the physician to safeguard the health of the people. His or her knowledge and conscience are dedicated to the fulfillment of this mission. A physician must be free to use the most appropriate treatment if in his or her judgment it will result in the alleviation of suffering or the restoration of health or saving the life of the patient"*.

Sadly today, doctors who choose to practice along these lines using their knowledge and skill to find the best way to help a patient, can risk censure by the Medical Council. I have often said that in New Zealand we have the finest doctors and specialists in the world but until we give them freedom to look beyond the pharmacology that they were taught in medical school and learn more about nutrition, and how to prevent the onset of disease, we will continue on the path we are on. I know of several highly skilled New Zealand doctors who have been attacked by the Medical Council for prescribing nutritional solutions and side effect free safe and effective natural health products. These courageous doctors were practicing preventive medicine, with the objective of keeping their patients out of the 'system'.

This approach is regrettably in conflict with a system that only approves and funds patented drugs. Isn't it sad that big business has such control over our lives?

Australian Professor - Ian Brighthope M.D., M.B.B.S., D.Ag.Sci, FACNEM, FACHM - has his own version of a well-worn modern parable. "A surgeon is out jogging by a swiftly flowing river, when he hears the cry of a drowning man. The surgeon dives in, puts his arms around the victim, pulls him ashore, and resuscitates him. He resumes his jogging, only to see another man drowning. He drags the second man out and gets him breathing. The surgeon gets back to jogging, but before long he comes across another man drowning, and another. Looking for help he calls upon a practitioner of complementary medicine, who is standing nearby, absorbed in thought. The surgeon calls out to him to go after one drowning victim while he attends to the other. When the practitioner of complementary medicine is slow to respond, the surgeon shouts, "Why aren't you doing anything?" The complementary practitioner finally responds, "I am doing something. I'm desperately trying to figure out who's throwing all these people into the river."

Professor Brighthope says "This story illustrates one of the ongoing dilemmas in our current healthcare system, a system so desperately busy treating the pathological endpoints of disease, endpoints that have more and more people seeking medical care, waiting on hospital beds, queuing up for surgical interventions, that it has little hope of contemplating what got these people there in the first place. Which is not to say that such efforts are necessarily futile, or that a considerable amount of short term good is not being accomplished.

Nevertheless the system is so preoccupied with what the sociologist John McKinlay has called 'downstream endeavors': (superficial categorical tinkering in response to almost perennial shifts from one health issue to the next), that it has little chance of actually resolving anything. The current system is so busy fishing people out of the river, that it has little time to contemplate causes, or implement prevention, or 'upstream medicine.'

Professor Brighthope says “I am talking in extreme terms here, of course there are many conventional medical practitioners who do implement prevention, lifestyle reforms etc, but in the main its the complementary healthcare practitioners that are achieving these ends, even though they may not be receiving the acknowledgement they deserve. Although things are certainly changing, the situation remains a ‘two steps forward- one-step-back’ progression at best. Up against the drug armamentarium of big pharma, nutritional supplements are often viewed as something of a novelty item, something to be toyed with but not to be taken all that seriously. They say “Patients deserve ‘something that really works’, as opposed to a spurious concoction of vitamins and minerals, things that we should be getting from our diet anyway”. Nevertheless the medical conservatives are taking notice”

American Doctor Andrew Weil says that we need “An ‘upstream’ model, that encourages individuals to ‘express ownership of their own health’ rather than leaving it up for grabs, hoping that they will be saved by drugs and surgeons and the hospital system, and be resuscitated when they go under”.

New Zealanders are known for the ability to innovate and break new ground. When it comes to health we should not see the need for change as a threat but as a challenge that can be embraced in the best interests of all New Zealanders.

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