

# 1 The Emergence of Alternative Medicine

In 1983 when Joshua, my oldest son, was eighteen months old, a hot iron fell on his foot and remained there until the person watching him discovered it. Most of the skin on the top of his tiny foot was gone. The emergency room doctor, his pediatrician, and three or four physician friends who examined him all agreed this was a “third-degree burn.” There was no way it could ever heal by itself. The only reasonable course of action was a skin graft. The well-known surgeon at a highly regarded burn center concurred. Laura (his mother) and I both felt lucky that the surgery could be scheduled very quickly. But our feelings changed when we found out that our son would have to be tied to his bed for the entire lengthy hospitalization to prevent him from scratching at the graft, and that the sight of this would be so upsetting that we would be restricted to a brief visit each day.

There had to be something else we could try before subjecting our little baby, no less ourselves, to such an ordeal. Laura’s brother had a suggestion. He knew that in Japan, after the atomic bomb was dropped, the juice of the aloe vera plant had been used to treat people with much more severe burns. When we decided to try this ourselves, the Japanese proprietor of a nearby nursery offered helpful advice on which parts of the plant to use and how to start growing our own supply so as not to be dependent on him. Three times a day I carefully dripped the freshly cut aloe vera onto the wound. As I did, I drew on my

own knowledge about how imagery affects the body. I would speak to my son in a soothing voice, pointing his finger at his foot and describing over and over what I wanted to happen: “The white part of your skin at the edge is a tiny bit bigger than it was yesterday, the dark part is a tiny bit smaller. . . . Good, good. Your skin is getting stronger. Let’s think about how the juice is helping your skin grow.” In about three months the foot had healed. By the time Joshua was six, only the slightest outline of the burn could be detected.

As soon as it was clear that the burn had healed, Laura proposed that we get in touch with all the physicians who had advised a skin graft for our son. Surely they would want to know about a less intrusive and less costly alternative. Those we spoke with were all happy about the outcome. But not a single one was willing to say that they might suggest our solution to someone else in a similar predicament. It wasn’t only their fear of a malpractice suit. Most were frank: treating a third-degree burn with aloe vera was just too far removed from what they had learned, and what their colleagues would find acceptable. Our experience, no matter how important for us, meant little or nothing to them.

By 1996, when I started to write this book, the situation was vastly different. In September of that year, a *Life Magazine* cover story, “The Healing Revolution,” predicted that health care in America was about to be “completely transformed” by the integration of “ancient medicine and new science to treat everything from the common cold to heart disease.” The first page featured a dramatic photograph of cardiac surgery being performed at New York City’s Columbia-Presbyterian Hospital, with an “energy healer” laying on hands alongside the surgeon. Anyone who frequents a newsstand would hardly have been surprised to come upon this cover story. During the few months prior, stories about alternative medicine had appeared on the covers of both *Newsweek* and *Time*.

These prominent cover stories are but one manifestation of the immense amount of attention that the mass media have given to something that is variously referred to as “alternative medicine,” “holistic medicine,” or “complementary medicine.” A visit to any large chain bookstore will reveal an abundance of books about alternative medicine; they fill the large sections devoted to health, medicine, self care, and self help. Just one of Deepak Chopra’s books on alternative medicine, *Ageless Body, Timeless Mind: The Quantum Alternative to Growing Old*, has sold more than seven million copies since it was first published in 1993. Sales figures for this book and similar ones by physician-authors like Larry Dossey, Bernie Siegel, and Andrew Weil have consistently placed them atop the best seller lists. To the extent that the American public reads nonfiction books, they are likely to be about alternative medicine.

Some of the media attention and popular concern comes from the vivid personal testimony offered on behalf of various alternative treatments. Celebrity accounts have received a good deal of attention. Shirley Maclaine, who has abandoned Western medical pharmacology for “the healing powers to be found in acupuncture, spirit messages and crystal rocks,” now teaches that we can all learn to heal ourselves by visualizing colors specific to each area of the body. The powerful description by cultural critic Norman Cousins of his battle with “an incurable illness,” ankylosing spondylitis, was particularly influential. Cousins attributed his success in recovering from what doctors thought to be an irreversible illness to his alternative approach to healing. He reasoned that “if negative emotions produce negative chemical reactions in the body, wouldn’t the positive emotions produce positive chemical changes?” On this basis he stopped his medication, checked himself out of the hospital, began an innovative regimen of massive doses of vitamin C and amusing movies, and sought “love, hope, faith, laughter, confidence, and the will to live. . . .” His successful

recovery made him a crusader for his views. Since he was well connected and widely respected for his probing intellect, those who may have scoffed at the anecdotes of others were less likely to dismiss Cousins's story. Although his experience became widely known through his book, the initial account (upon which the book is based) appeared in the highly prestigious *New England Journal of Medicine (NEJM)* and included his assertion that "the hospital was no place for a person who was seriously ill." Cousins spent the remainder of his years on a medical school faculty trying to persuade academic medical researchers to take his ideas seriously.

Vivid stories detailing all sorts of personal battles and triumphs over life-threatening diseases through the use of alternative healing practices have become common. *Double Vision: An East-West Collaboration for Coping with Cancer* is among the most impressive. This book details how when twenty-one-year-old Drew Todd was diagnosed with a rare form of aggressive cancer, his mother Alexandra set out on an unrelenting quest to discover what was available beyond conventional care. Their story and similar accounts not only acquaint readers with many of the specific alternative techniques (Todd used a macrobiotic diet, relaxation, visualization, and acupuncture, among others), but deliver powerful messages about the possibility of personal transcendence and the shortcomings of the mainstream health care system.

For the most part, however, the media has paid attention to alternative medicine not merely because of the triumphs of the famous. Rather, a consistent stream of well-researched academic reports has emerged over the past several years, portraying the American population as actively engaged in alternative practices and as believing in the ideas that underlie many such techniques.

The most frequently cited of these accounts, a 1990 survey of a national sample of American adults, found that about one-third had used what was termed "unconventional medi-



cine” in the past year to treat a medical problem. In 1997, when the researchers repeated the survey, those who reported using alternative therapies in the past year had jumped to over 42 percent. In both years affluent, highly educated whites were the most typical users. Although almost all the users of these unconventional techniques were using mainstream care at the same time, in both surveys over two thirds of the users did not discuss the unconventional therapy with their physician. The authors speculate that this “deficiency in patient-doctor relations” might “derive from medical doctors’ mistaken assumption that their patients do not routinely use unconventional therapies for serious medical problems.” Those who used unconventional treatments made an average of nineteen visits per year to “alternative providers” to receive care. By extrapolation the authors conclude that the 427 million visits Americans made to alternative practitioners in 1990 had grown by 47.3% to 629 million visits in 1997. This far exceeds the 336 million visits made to all primary care physicians that same year. The total out of pocket cost of all this alternative care was estimated to have increased by a similar proportion to more than 27 billion dollars in 1997, well in excess of what was spent out of pocket on all physician services. Yet the methodology of the study specifically excluded any visit or use of unconventional medicine for the purpose of prevention or health promotion, considered by many advocates to be the primary strengths of unconventional medicine. Therefore, these findings should be seen as very conservative estimates of the magnitude of the alternative medicine phenomenon. In fact, two other national surveys reported in 1998 also found that 42 percent of households polled had used some type of alternative care within the past year.

Research on specific forms of alternative care consistently presents a similarly impressive picture of extensive use. For example, approximately a third of all those who suffer from back pain—an extremely common, chronic condition—chose chi-

ropractic rather than mainstream medicine for treatment. Depending on the study, between a quarter and a half of all individuals with a terminal illness seek alternative care at some point in the course of their disease. The prevalence of alternative medicine appears to be widespread regardless of the severity of the medical problem. Studies have indicated that socioeconomic status is either independent of the use of alternative medicine, or that higher status and more highly educated individuals are overrepresented among alternative medicine users.

Alternative health care is not always easy to define, however, or to distinguish from broader health promotion activities. This can make specific statistical findings difficult to interpret. For example, *Natural Foods Merchandiser* reports that sales of “natural foods” totaled \$9.17 billion in 1995. But it is unclear how much of this sum can reasonably be considered to have been spent on alternative medicine. The \$1.5 billion reported by the *Los Angeles Times* that Americans spent on “medicinal herbs” in that same year might be a better estimate, although to use this value assumes that we know how these herbs are being used. Thousands of people use “cat’s claw” (a vine from the Amazon, long used by Peruvians for many types of healing) because they believe it will strengthen their immune systems. Are they practicing alternative medicine even if they are in good health? What if the user is HIV positive? Does using herbs for weight loss qualify as “alternative medicine”? Attempting to resolve these ambiguities leads to the matter of defining precisely what is meant by the term “alternative medicine,” as well as the terms “prevention” and “cure,” along with the most basic notions of “health” and “illness” themselves.

However these conceptual matters are resolved, the media, the public, policymakers, and many people in the established health professions have already begun to act in ways that break down whatever distinctions exist between alternative and conventional care. Just a few years ago, it would have been difficult to imagine an “energy healer” working side by side with a cardiac surgeon in the operating room at one of the nation’s lead-