

HEALTH & WELLNESS / LIFESTYLE

Toward A New Definition of Health

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I work in a Chinese medicine clinic where my primary medical procedures are acupuncture and the administration of herbal medicine. Often times, when speaking in front of a group of MDs, I'm given a look that suggests, "You're not an MD, you don't know what we're dealing with in our practices." This look disappears as the seminar gets moving, but I wanted to address it nonetheless and give some background on why I exist as a practitioner and trainer, and why I have a full practice if what I do isn't really medical. To do so requires some background and reframing on what we are trying to accomplish as medical practitioners. We must fundamentally change our understanding of what "health" really means.

When I began my practice as an acupuncturist in San Francisco in the 1990s, Chinese medicine was still largely considered a fringe medical practice, even in the most liberal parts of the United States. When I travelled around the country and told people what I did for a living, I'd often get a confused look in response, or a wry smile immediately followed by, "Really? Why?" My own father thought it interesting that I'd choose to spend four years in a "fake medical school" to learn Chinese medicine and wondered aloud when I'd come to my senses and join his ranks as an MD.

These days, my family knows that I made the right decision, not only for myself, but for my patients. My father has since retired, my brother (a professor of medicine at an Ivy League medical school) has largely left internal medicine behind to focus on research, and I have a busy practice specializing in treating patients who have tried everything else first. I love and respect modern medicine. It has saved my life several times and I believe that it deserves to be peoples' first choice when seeking to resolve many acute health issues.

But most health issues are not acute in nature. A review compiled by an electronic health records software company of more than 7 million primary care providers in early 2011, showed that almost all of the top 25 reasons why people were seeking medical care were for symptoms related to chronic conditions. The most common conditions were hypertension, hyperlipidemia and diabetes, with back pain, anxiety and obesity following closely behind.

These are all chronic issues that are routinely managed by modern medicine through medication and the admonition to change one's habits. These patients form the financial backbone of most primary care providers' practices and they are not happy with the way they're being treated. I echo their dissatisfaction with modern medicine from my anecdotal observation as an "alternative" practitioner, and the research backs this up. New studies by Survey Sampling International and The Research Intelligence Group show that two-thirds of patients around the world feel disrespected by their physicians. Unclear communication is a prime reason for patients' dissatisfaction. About a quarter of patients globally complain that physicians don't answer questions, don't involve them in treatment decisions and use medical terms with no explanation. This appears to be a direct outcome of doctors not spending enough time with patients (44%).

These facts alone may account for patients seeking out practitioners of various complementary and alternative medical modalities (CAM). A study in the *Journal of the American Medical Association* found that the majority of alternative medicine users appear to be doing so largely because "they find these healthcare alternatives to be more congruent with their own values, beliefs and philosophical orientations toward health and life." In particular, subjects reported a holistic orientation to health, a transformational experience that changed their worldview.

Whether or not you "believe" in acupuncture, chiropractic, naturopathy, homeopathy or any of the myriad alternative medical options people are may turn to is immaterial. Patients are increasingly taking matters into their own hands and seeking out alternative solutions. A 1997 study of CAM usage in the *New England Journal of Medicine* (NEJM) showed that the number of Americans using an alternative therapy rose from 33% in 1990 to 42% in 1997, and some research estimates the number may be as high as 70% today. The study also found that, in 1997, Americans spent more than \$27 billion on these therapies, exceeding out-of-pocket spending for all U.S. hospitalizations, and the number of patient visits to CAM providers exceeded those to primary care physicians.

People would have no reason to seek out alternative medical options if modern medicine was solving their issues, or if patients felt their treatment was congruent with their beliefs and expectations. The reason I'm in business is not only because modern medicine is largely ineffective for a large number of patients with chronic medical conditions, it is because they are not getting the attention they feel they deserve from their primary care providers.

I often agree that alternative medicine may not work any better than modern western medicine for many of the chronic conditions we attempt to treat. What can we do for the patients seeking relief from chronic, unresolved issues that may have no effective treatment?

We must treat what we are able, reorient our patients, and reframe their issues such that a potential life living with their condition is not so much a dark place to end up as an enlightening new opportunity. I say this not to be condescending, not to "give up" on medicine as such, but because it is the right thing to do as a health care professional and it may actually be more in line with our patients' expectations. And what is the alternative, really? To send them back out the door, heavier in spirit, lighter in wallet and alone in their condition?

In order to know our place as medical professionals, we must start by defining the word "health." As it turns out, we are primarily trained to fight disease, becoming familiar with all the metaphors of war, victory, failure and the Cartesian views of deductive reasoning and mind being separate from body. Through said reasoning, we come to believe in a passive view of health; that health is an absence of something, in this case disease. From that vantage point, it is no wonder medical practitioners have such high rates of burnout, fighting a never-ending uphill battle against bacteria, microbes, viruses and the like in order to help our patients reach a nebulous state of grace in body and mind.

This view of health is not sustainable, and the fact that so many people are seeking alternative views and taking matters into their own hands is only further evidence that our fundamental understanding of what health is needs to change. When we talk about well-formed outcomes, our neurology is set up in a "toward" orientation. In order to be effective, our goals need to be framed in a way where we move toward an outcome rather than away from one. Toward an understanding of health rather than away from disease. We then may choose to define health as a dynamic state where flexibility is the cornerstone.

Health may simply be the flexibility to adapt to circumstances and to continue to have an acceptable quality of life. Such a definition changes where we as healthcare practitioners fit into the lives of our patients. We become much more the arbiters of helpful information in our patients' journey toward a continued quality of life, than the center of their hope that they can get rid of something.

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