

HEALTH & WELLNESS / LIFESTYLE

A Word With Dr. Andrew Weil on Healing and Integrative Medicine

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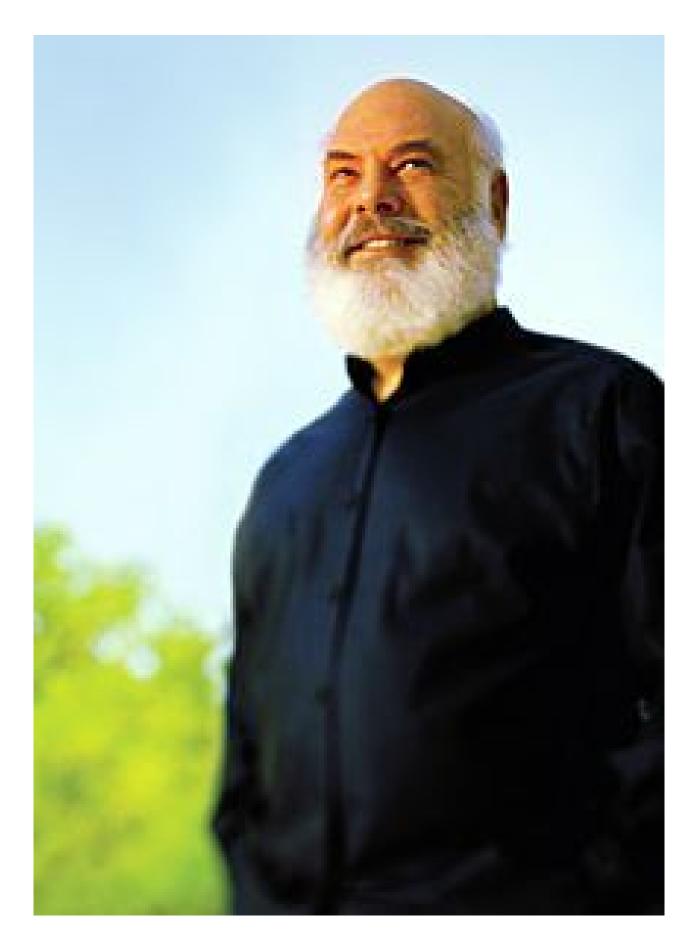
I like to push my consciousness forward. One of my teachers instructed; we can only take our patients as far as we've gone. So when someone actually starts to create a new consciousness, it gets my attention.

Such a person is author and physician Dr. Andrew Weil. His name is synonymous with Integrative Medicine; he is the Founder and Director of the Arizona Center for Integrative Medicine and was named one of the world's 100 most influential people by *Time* Magazine in 2005. Dr. Weil recently had a new book published called *Spontaneous Happiness* that explores the roots and natural treatments of the current depression and anxiety epidemic.

I recently got a chance to catch up with Dr. Weil and ask him a few questions regarding integrative medicine among many other things.

Q: You're best known for pioneering Integrative Medicine in what you consider a biopsychosocialspiritual approach. In Oriental Medicine we have a long history of health being not only physical but part of the mind, spirit and society in which we live. Is mainstream Western Medicine finally starting to get this?

A: Absolutely. Practitioners of conventional medicine are perhaps even more fed up than patients with the drug-only approach to preventing and treating illness. Most doctors today are hungry to learn more about the mind-body continuum and how they can better help patients access their innate healing capacity.



I define integrative medicine as healing oriented medicine that takes account of the whole person (body, mind and spirit), including all aspects of diet and lifestyle. The Arizona Center for Integrative Medicine (AzCIM), which I direct, has played a prominent role in shifting the perspective of mainstream physicians through education. For example, AzCIM is working towards

the day when integrative medicine will be a standard part of the medical school curriculum. In addition, national integrative medicine conferences for health professionals co-sponsored by AzCIM are consistently well attended, and AzCIM offers a variety of popular educational courses for both the public and professionals on integrative approaches to health

(http://integrativemedicine.arizona.edu/education/online_courses.html). The success of AzCIM has spawned or influenced the creation of similar programs across the country. Therapeutic approaches that as recently as a few years ago were difficult to access in a conventional medical setting, such as meditation and acupuncture, are now recommended by medical doctors on a regular basis, and research supporting complete healing systems, such as Oriental Medicine and a range of complementary and alternative (CAM) therapies is included in some of the finest medical journals and textbooks in the world.

Q: There is an epidemic of depression and the World Health Organization predicts that by 2030 more people will be affected by depression than any other health condition worldwide. You are a lifelong medical multiculturalist- can you explain what's going on in the world?

A: I am often asked this question, and while a number of reasonable explanations exist for the worldwide increase in depression, I believe the single biggest factor is the relatively recent but dramatic changes that have occurred in living conditions in industrialized nations. Depression occurs everywhere, that is true, but nowhere does it affect as many people as in affluent, technologically advanced countries. Consider that we eat manufactured food, stay indoors where we are generally sedentary, are subject to information overload, are over-stimulated by the media, and in an age where connection is but a mouse click away we are becoming more and more isolated from one another. Spontaneous happiness is incompatible with social isolation.

Q: How do you see emotions eventually leading to physical problems?

A: Mind and body are inseparable. While the impact of physical illness on emotional well being has long been recognized, conventional medical research has begun to focus on the interplay between mood disorders and a range of physical illnesses, including heart disease, obesity and autoimmunity. Most experts now believe that longstanding emotional disturbances can elicit inflammatory changes in the physical body, and chronic inflammation is the root cause of many serious illnesses, especially those related to aging.

Q: Happiness is one of many emotional states we experience. What do you mean by happiness and how can it become "spontaneous?"

A: Human emotional states vary from extremely negative to extremely positive, but I do not consider happiness to be at the midpoint. The neutral position on the mood spectrum, what I call "emotional sea level," is not happiness, but rather contentment.

Contentment, balance, and resilience help to dampen amplitude of our normally variable emotional oscillations and so constitute a more reasonable alternative to the perpetual happiness demanded in today's society. Lao Tzu said, "One who contains content, remains content." The ability to feel contentment is a key component of emotional well-being. I believe that this midpoint of healthy emotional variability can be cultivated and thus become spontaneous.

Q: You say in your book, "I have a low opinion of all the drugs prescribed for anxiety" and you strongly advise against relying on them, yet the pharmaceutical industry has created a huge ad based market and is now vigorously exporting these messages worldwide; how do mainstream and alternative therapies combat such influence?

A: Another important factor behind the increased incidence of anxiety and depression is the significant rise in prescription drug use for mood disorders, largely as the result of pervasive marketing by the pharmaceutical industry. Endless advertising has convinced us that all mood disturbances, regardless of severity or duration, are due to biochemical abnormalities that can only be remedied with a pill. Prescribing sedatives or antidepressant drugs is too often an easy but inadequate substitute for developing treatment plans focusing on diet, lifestyle and other concerns that impact health, including emotional health. Many effective treatment options exist outside of prescription drug therapy for mild to moderate anxiety or depression. Healthcare practitioners need to assume the role of the last line of defense against the endless barrage of drug ads and editorial propaganda, while also remaining open to the appropriate use of pharmaceuticals in the setting of severe mood disturbances.

Q: You call for a new approach to mental health and claim the basic assumptions of mainstream psychiatric medicine are "obsolete and no longer serve us well." What is this approach and how will it encompass Eastern and Western therapies?

A: The biomedical model explains depression and other mood disturbances on the basis of chemical imbalances in the brain, specifically of neurotransmitters. In light of this, psychiatrists have "evolved" from being facilitators of emotional insight in patients to becoming prescription drug dispensers, all in the hope of modifying brain chemistry. The integrative model of mental health I espouse neither ignores brain biochemistry nor rejects the potential benefits of appropriate psychopharmacology, but sees emotional disturbances such as depression as multifactorial heath problems rooted in complex interactions of biological, psychological, and social variables. Simply put, my colleagues and I prefer to use other methods first and to use prescription medication for short-term management of crises rather than rely on them as long-term solutions. Chemical imbalances in the brain may indeed correlate with depression, anxiety and other emotional disturbances, but the arrows of cause and effect can point in both directions. Optimum emotional well-being can often occur through a careful combination of diet, lifestyle, mind-body and other therapies that have the potential to optimize brain chemistry, correct deficiencies in neurotransmitters, and enhance emotional balance.

Q: I have many doctors make referrals to me but it is always last. I'm truly seeing the hardest, most treatment resistant cases in the country. Why don't more doctors suggest alternatives before drugs and surgery?

A: The core curriculum offered at most conventional medical, nursing and pharmacy schools focuses almost exclusively on disease management and intervention, not on health, disease prevention, or CAM therapies. My partners and I at AzCIM have long recognized the need for change within the system of healthcare education; our mission has always been to lead the transformation of healthcare by creating, educating and actively supporting a community of professionals who embody the philosophy and practice of integrative medicine. No future doctor should leave training without a working concept of health, an in-depth understanding of the importance of healthy dietary and lifestyle measures, and an appreciation for the therapeutic potential inherent in healing traditions from around the world, as well as good conventional medical treatment.

My column explores the symbiotic relationship between the health of people and the health of the planet. Perhaps we can add "Eco" somewhere in the biopsycosocialspiritual model. How does the medical community address the bio-ethics of their field such as medical drugs being flushed or urinated down the toilet polluting the earth?

The impact of environmental toxins on the health of people and our planet is undeniable, but most

healthcare practitioners are unaware of the extent of the problem, let alone how they may be contributing to it. At AzCIM, we aim to be part of the solution by offering our course entitled, "Environmental Medicine: An Integrative Approach." Thanks to an unrestricted educational grant, the course is available free of charge to medical and nursing personnel. We believe this is one way to encourage medicine to "clean up its act."

Q: Though most alternative practitioners believe in Integrative Medicine we are concerned about what that means for our respective fields. Are we being assimilated into a broken system or is a new model emerging?

A: I consider many CAM therapies to be core components of integrative medicine, and I respect and honor the traditions behind these practices. Some CAM therapies are already being offered within the walls of conventional medical practices and hospitals, but often they have been co-opted rather than being offered in partnership with local CAM providers.

Many schools that offer training in specific CAM therapies have worked together to develop competency standards for their unique clinical art, a practice that is invaluable when trying to ensure that practitioners will be appropriately respected and adequately reimbursed for their services. In addition, CAM practitioners should redouble their efforts to participate in research exploring clinical outcomes associated with their treatment, underlying mechanisms and cost-benefit analyses, especially in association with integrative medical doctors. These types of actions will support the more rapid arrival of the new model of healthcare I believe is coming that will better serve our patients and our planet.

Q: You have a large website that supplies health information for patients. I've noticed more and more patients becoming increasingly frustrated with their doctors and the medical system. What's your advice for people trying to navigate what's best for them faced with an overwhelming amount of choices?

A: At the root of good healthcare is an acceptance of each person's responsibility for her or his own health. Identify and work with a good primary care physician with whom you can engage in a healing partnership and get credible assistance with developing a personalized healthy diet and lifestyle program to prevent illness and optimize health. Then maintain that program as best you can for the rest of your life.

Q: Any last words of encouragement or caution for the future?

A: Healthcare changes may not be happening as quickly as we would like, but their existence is undeniable. Keep the faith.

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