

Lime Jello on Morphine

WHY CHINESE MEDICINE IS A SUPERB CHOICE FOR POST-OPERATIVE RECOVERY

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Taste is in the eyes... actually the mouth... of the beholder.

My food preferences have changed, lightening from the food of my youth. My parents loved heavy eastern European cuisine and I loved it as a child. Now I enjoy leaner, healthier whole foods. Practicing Chinese medicine changes a person, including how we eat.

But there are times when our food choices clash with the main culture. Here's a story I hope you enjoy:

Thirteen years ago, I had major surgery. My three-hour operation took place a day after a grueling "bowel preparation" regimen during, which I overdosed on a prescription medication that my doctor insisted would clean my intestine prior to surgery. The pain and cramping led me to hide in a dark bathroom the day before hospitalization. The next day, I entered the OR exhausted and dehydrated (as drinking water was forbidden at the hospital). In the recovery room, hours later, my post-operative fog dissolved into sunshine as a nurse gave me a "PC" (patient controlled pump) for morphine.

All was glorious! The surgery was successful, the doctors were my best friends. I was grateful to all humanity; particularly the hospital staff, whom I believed were there to help me. One of them gave me a menu. Would I prefer meatloaf or lasagna as my first food? Ice cream or lime jello for desert? I felt so empty - the thought of food was appealing!

When the meal arrived, despite the euphoric effect of the drug, I just couldn't eat the heavy food, so I started with desert. Lime jello - pure sugar and artificial flavoring, nothing even remotely nutritious - tasted wonderful. As I delighted in the narrow, tart sensation of the lime against the swirling high of the sugar, I was convinced that the staff was giving me exactly what I needed to heal.

I was seriously high.

Times have changed, and nutritional knowledge has come a long way in 13 years. "Healthy" options are now promoted everywhere, from public schools to fast-food restaurants. Michelle Obama has made healthy eating her top agenda. Documentaries such as *Super Size Me* and *Fed Up* are outing agribusinesses like Monsanto and demonizing sugar as detrimental, even addictive. Even public policy debate admits that diabetes and obesity are now at epidemic levels.

We want to know, with certainty, what is healthy for us.

As such, both popular media and medical experts are responding to the public's demand for information, however credible. While food critics and specialty chefs are making huge profits on reality TV cooking shows, there is strong competition for validity among nutrition "experts."

You may enjoy what you eat, but is it healthful for you?

Ask 1,000 experts, you get 1,000 answers. Pick a diet and you will also find dogma. From macrobiotics, to South Beach, to Weight Watchers and their ilk, to raw, Paleo, gluten-free, or lactose-intolerant, the diet experts assert that their approach will improve your health. And we believe them! Despite a lack of credentials in any discipline resembling medicine, we even trust movie stars to give us nutritional advice. Since when was Suzanne Somers an expert on oncology?

On the other hand, why not trust them, since the nutrition advice we get from our doctors is so incomplete? Every time I treat patients for indigestion, constipation, diarrhea, or reflux, I ask them if they have received dietary counseling for their condition or are currently taking medication or supplements. Many of them have previously taken Prilosec to suppress gastric acid (well-marketed for almost any nonspecific form of indigestion), Imodium (a synthetic anti-diarrheal) or Ex-lax (for constipation). I have never had a patient tell me that their doctor asked them to change their diet or even analyzed the relationship between what they eat and how their gut reacts. The cardiac patients with high cholesterol are only sometimes told to lose weight, but few are given dietary advice about how to do this.

Not to paint Western providers as buffoons, I admit that I asked my own excellent family doctor why her colleagues avoid talking about the specifics of diet (alkaline, acid, high fat, sugar, gluten, etc.). She said, "We aren't really trained in nutrition. It's absurd isn't it?"

"Is that true for gastroenterologists as well?" I asked.

"Sadly, yes," she said.

In Chinese medicine, by contrast, we consider food a form of fuel that is intended to support healthy functioning. We learn which foods contain specific energies to heat or cool, moisten or dry, move or stabilize, give long-lasting or short burst of energy, etc. We also know which foods benefit each of the main organs and which medicinal herbs will support a particular effect. We learn about fasting, cleansing, and detoxification programs and when they are indicated. Every time I treat a patient who is weaning from pain medications, for example, if he or she is willing, I add a nutritional detoxification program to their treatment plan.

So, recently, when one of my patients was hospitalized for a bowel resection, we talked about what she should eat after the surgery. Coincidentally, she was undergoing the procedure at the same hospital where I had gone 13 years ago. Since the popular knowledge of nutrition has come so far, I asked her what advice she had been given about her post-operative diet. Compliantly, this elderly woman produced a list of "Approved Foods" given to her by the surgeon's office:

Canned carrots, white bread, fine grits, cream, canned fruit cocktail in juice, cream of chicken soup, white potatoes, white rice, margarine and lime, but not red jello!

My memory of the joy of post-op lime jello quickly changed to horror that nutritional knowledge in hospitals, at least, had not changed at all in 13 years.

So, step by step, we made of list what foods and liquids she would need at which stage of healing. At my recommendation, she augmented her bowel preparation by drinking electrolyte drinks the day prior so she would not feel dehydrated and exhausted the day of surgery. Then, we developed a recipe of root vegetable broth to drink immediately post-operatively. She did the cooking beforehand, and her daughter brought this as well as pureed root vegetables cooked in chicken broth to the hospital. We eliminated any foods that were canned or otherwise processed, as well as those that contained trans fats, and replaced them with organic whole-food choices.

Then, we discussed how to reconcile the difference between the surgeon's recommendations and the plan we had devised. My well-educated patient, formerly an accountant, said precisely, "He knows about surgery, you know about healing." And that was that.

Needless to say, my patient's recovery is better than it would have been without proper nutritional support. She reports that she is recovering her energy well and the initial soreness is dissipating. Her current experience compared well with a very poor recovery from a previous, less invasive procedure that she had two years ago (after which she first sought my help.)

Interestingly, her health complaints prior to surgery were chronic constipation, high blood pressure, and high cholesterol, all of which she listed on the pre-admission forms for the hospital. I was frankly surprised that foods high in sodium and trans fat were "approved" given her cardiac history, and that white bread and white potato were "approved" for someone suffering from chronic constipation. Before her hospitalization, we had replaced these choices with lower salt, high-fiber options, so it seemed incongruent for her to return to the diet that may actually have contributed to her diseased large intestine.

Once again, I ask myself what role Chinese medical practitioners should play in the scheme of American healthcare. There are times when surgery is necessary. Yet, it is clear that Chinese medicine is a superb choice for post-operative recovery, although it has barely been integrated into Western healthcare systems. If it were, we practitioners would use the full spectrum of our skills to help a patient recover, including sound nutritional advice and acupuncture.

Yes, acupuncture to help her recover from surgery.

In 2007, Duke University's Dept. of Anesthesia published the results of 15 randomized clinical trials which proved that, "...the amount of opioids needed for patients who received acupuncture was much lower than those who did not have acupuncture, but the most important outcome for the patient is the reduction in the side effects associated with opioids," said Tong Joo Gan, MD, a Duke anesthesiologist who presented the analysis of at the annual scientific conference of the *American Society of Anesthesiology*. "These side effects can negatively impact a patient's recovery from surgery and lengthen the time spent in the hospital."

Imagine a time in the not too distant future, where surgical patients across the United States will be offered acupuncture and good food in hospitals. Given the current state of nutrition in hospitals, perhaps postoperative morphine is necessary for more than just pain management. If it made lime jello so appealing....

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