

## Chronic Illnesses: Why Are Natural and Complementary Therapies Under Attack in Australia?

By <u>Leisa Woodman</u> Asia-Pacific Research, July 19, 2019 Region: <u>Oceania</u> Theme: <u>Science</u>, <u>Society</u>

Let's assume that the Australian Medical Board and AHPRA are acting in good faith with their public consultation process on the future of complementary medicine, found <u>here</u>. Unfortunately, even in such a best-case-scenario, the process seems to stem from a series of misunderstandings about the patient body, chronic illness, and the services integrative therapists provide.

Chronic illness can be a hard nut to crack, draining years of energy and finances and taking a toll on personal relationships. The image of the chronic illness journey presented to the public by the mainstream media and AHPRA is that it is prolonged by a sub-culture of irresponsible "quacks" prescribing baseless, complex and absurd treatments and procedures, before the patient finally comes to their senses and finds their way to a conventional practitioner for a ten dollar packet of pharmaceutical pills.

I ask you, how likely is this scenario, really?

People always take the cheap, easy way first and indeed I can report that the medical rubric is the other way around: patients seek integrative and complementary practitioners because they have exhausted the regular system and are still not well. In the case of chronic illness, such as CIRS (mould exposure) or PANS or tick-borne infection, anywhere between 2 and 30 doctors before making the switch has been known. Sometimes, the difference between the two systems that makes changing worthwhile is not even the chemical solution (which can be identical, since integrative doctors use pharmaceuticals too) but the attitude: what can really be solved in a ten minute GP appointment, if someone has been sick for five years? In this time slot, the patient themselves is forced to more or less "sell" their own symptoms and Googled self-diagnosis, and a bad sell will land them with a pack of anti-depressants — nothing more.

What AHPRA does not consider is that patients who have chronic, new and emerging conditions, and conditions with environmental factors, are falling through the cracks of conventional medicine and are being picked up in complementary healthcare, which is uniquely equipped to get to the bottom of lifestyle factors. They assume perfection on the part of the conventional system, when none exists. One only need look at <u>statistics</u> regarding mainstream medicine as a cause of death, or some of the other recent articles being published about the state of our healthcare to see that for the good of our society and well-being, we need to release ourselves from a medicine which is clearly, to

those who can see past the undeserved hero-god archetype, an uncompassionate multibillion dollar drug business structured around individual symptom suppression. We must move intelligently and creatively towards holistically treating the *individual*. Antidepressants cause suicidal thoughts, statins drain life-giving enzymes, antibiotics destroy the microbiome, estrogen has been linked to breast cancer and painkillers cause lifeshattering addictions. Why pretend that there couldn't possibly be a better way?

If one is considering herbalism or plant medicine specifically — of any tradition — one again detects intellectual dishonesty in the proposal. Most of these compounds have been studied, <u>some</u> more widely so than pharmaceuticals, but there is generalisation and a lack of nuance in the language when it comes to the definition of "complementary". It simply means not corporate. How is this treating patients and practitioners like free-thinking adults in an open, capitalist society? It would be anti-science, if I could endorse such a term, but I prefer unscientific, illogical, counter-productive and anti-competition. The sad truth is, these ancient medicines are a lifeline for patient cohorts who are waiting for grindingly slow academic processes to fund, then come up with, a cure, to which they are in no way ideologically opposed, though that is often the suggestion.

Of course, if one was feeling cynical, one could suspect very little good faith in a process which has shown itself in the past to be unyielding to plain forces of global profit and the limited, unworkable and disembodied epistemology they encourage and allow. One only hopes, such fears are irrational, this time.

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