



“In The Kingdom Of The Sick” A Reflection

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This book by Laurie Edwards, subtitled “A Social History of Chronic Illness in America”, brings to light many of the daunting tasks faced by the modern physician. Ms. Edwards has a Masters in Fine Arts and teaches health and science writing at Northeastern University. Her chief credential for writing this book lies in herself having a variety of chronic diseases and her extensive experience as someone who has battled chronic illness. In many ways this book has the feel of a blog come to manuscript in its informal tone and selective use of “science” to defend a point of view. Given that lens, this brief work (212 pages) documents many of the factors leading to a transformation in modern “disease-care” medicine.

The learning point for me is to note my dinosauric clinging to my simpler time as a physician before the days of the internet. In the 90s people rarely went to the fledgling internet, today most everyone does. With the dawn of the “Misinformation Era” and Direct-To-Consumer Advertising, our populace has never been more confused or had more potential to be empowered. My resistance to change in this arena defies logic as I research so many things, yet simply Hope that my patients won’t go home and counteract decades of experience and individualized attention by listening to a dangerously misinformed blogger. This book shows me how easily an experienced, intelligent author can be duped by the mainstream media into what is the cause of disease. Furthermore, our author indelibly imprints into my psyche how difficult it is for those with chronic illness to hear responsibility without hearing blame, as I assume she has been blamed many many times, mostly by the medical profession.

I must become better at helping direct people to the best information websites, yet there are so few I trust. We live in an interesting time where I believe most every physician needs a personal assistant above and beyond his or her medical assistant just to help organize resources for their patients. The Western MD, even those trained today, are primarily taught medicine while working long hours in an acute-care hospital. Most exposure to chronic disease comes during an acute exacerbation where drugs and surgery are our (usually appropriate) primary tools for that disease. When your MD sees you in the outpatient setting, he has a few minutes as dictated by your insurance company reimbursement rates to treat a complex multifactorial illness with an often inappropriate drug or surgery. None of this is dealt with in our book as its strengths lie in looking at the social context of disease and how grass-roots consumer activism helped change some of the outdated “paternal” aspects of Western Medicine.

What I felt most from our author is the need for compassion from her health care providers. Medicine is practiced in a social context. Compassion is needed for your health care providers as well. Their training, the astronomic cost for that education, the average time allowed for an office visit, diminishing reimbursements, restrictive guidelines that eliminate thinking and damage autonomy, make practicing medicine a nearly impossible task. What is strange is that people feel that the Affordable Care Act (“Obama-Care”) will have any effect on the quality of their care when the pre-existing problems in our “Disease – Care” system so greatly overwhelm the “problem” of providing care to those with the pre-existing conditions that we are so poor at dealing with to begin with.

So where is the hope for healing in this “Kingdom of the Sick”? I told one of my patients yesterday, when discussing my upcoming article for this book, that I “cheat” when it comes to doctoring. Meaning I take time for my office visits, I don’t bill insurances and allow my patients that privilege, I use diagnostic tests far past “normal” blood work, I treat through lifestyle, orthomolecular and medicinal approaches based on individual people, and individual needs. She laughed and said, “You are a doctor then!?” The average doctor involved with primary care medicine has become an unwitting pawn of the pharmaceutical-insurance lobby that drives disease care. They need your compassion, they cannot heal you with the tools they are provided. You, the patient, however, can use information technology to empower yourselves with lifestyle medicine and orthomolecular approaches to health and healing that your physician has not been educated about. Learn to take control of your health care and treat yourself for health imbalances guided, if necessary, by Naturopathic and Integrative health care providers. When you feel drugs are necessary, go to your MD and get counsel on the best pharmaceutical or surgical approaches.

Each individual has the right, the freedom, and the duty to be their own best healer. Today’s technology allows you to do that! The pharmaceutical-insurance lobby has made it a necessity. Middle Path Medicine (www.middlepathmedicine.com) is part of that movement to educate and empower you as to the nature of true health care.

Your Journey to Health and Healing,
Gary E Foresman MD

References:
Upon Request

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