

WHAT  
WORKS  
WHAT  
DOESN'T



The Guide to Alternative Healthcare

PAT THOMAS

# WHAT WORKS, WHAT DOESN'T

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The Guide to Alternative  
Healthcare



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WHAT WORKS, WHAT DOESN'T  
The Guide to Alternative Healthcare

*Also by Pat Thomas*

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Headaches – The CommonSense Approach (Newleaf, 1999)

Cleaning Yourself to Death (Newleaf, 2001)

Alternative Therapies for Pregnancy & Birth

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# Foreword

This is a book about how not to be disappointed with alternative healthcare.

Even now, putting the words 'disappointment' and 'alternative healthcare' together in the same sentence seems audacious. After all, everyone knows that alternative medicine is the kinder, gentler approach to healthcare. And yet as alternative medicine becomes more widely utilised and available the numbers of disappointments and failures are multiplying.

If you are interested in alternatives to conventional medicine you will no doubt be aware of the explosion of information on alternative healthcare over the last few years. If you are very observant you may also have noticed that two types of information prevail. First there is the unquestioning, laudatory type commonly found in the popular media that promotes the idea that alternative medicine can cure anything. Then there is the completely negative type that promotes the idea that alternative medicine is simply quackery and placebo.

Clearly the road less travelled in alternative medicine is the middle ground, from where it is possible to ask questions and observe and to see the all-important bigger picture of healthcare.

I believe completely in the philosophy of alternative healthcare. It is my first line of care for myself and my family and I have seen it work quickly and effectively over a wide range of conditions. I believe in the treatment of the whole person and not just the symptom and I have experienced in my own life how effective this approach can be in dealing with a whole range of health problems.

I believe in alternative medicine, but I also recognise its limitations and the existence of quacks and charlatans. I also recognise, as

detailed early on in this book, that there is often a huge gap between the philosophy of alternative medicine and its everyday practice. For instance, when alternative medicine is practised in a conventional 'magic bullet' way – targeting symptoms with miracle cures – it ceases to be alternative medicine and becomes instead just another ineffective offshoot of the conventional system.

It is possible to believe in something wholeheartedly and still ask questions of it. In fact it sometimes takes greater faith to do so. Yet in alternative medicine opinions are increasingly becoming polarised into an 'anyone who isn't with us is against us' attitude which is antagonistic, unhelpful and unrealistic. I personally refuse to be pigeonholed into that position, and it is one reason why I wrote this book.

Although alternative medicine breaks many of convention's rules, one golden rule still applies: 'First do no harm.' If an alternative promises and then fails to work, if it makes the condition worse or produces new, more severe symptoms, it has broken the golden rule. What is more, this rule relates to more than just the physical body; it applies to the psyche as well. If a 'natural' remedy becomes just another emotional or psychological crutch, then a therapist has done just as much damage to the person in their care as if they had been given a synthetic drug.

The questions asked here are pretty basic. Does it work? Is it safe? Are there other options? To this end the information here is based on current research and is comprehensively referenced. However, I fully recognise the limitations of conventional thinking and research in helping us to understand how alternative medicine works and what it works best for. Those who clamour for more research into alternatives in order to make them more 'respectable' would do well to remember that very few conventional medicines and procedures have ever been 'scientifically' proven to work. In fact modern medicine is very unscientific. Tens of thousands of people experience a decline in their health status and even die as a direct result of conventional care every year. Our old ways of understanding the body – either as a simple machine or as an isolated biological

battlefield under constant attack from invading germs – are breaking down. Nevertheless at the present time research data is one of the best tools we have for beginning to understand the benefits of the whole range of alternative medicines and therapies.

By using alternative therapies appropriately, and for conditions they have been proven to benefit, the disappointment factor can be minimised. Being aware of the strengths and weaknesses of each type of therapy can also give you a better picture of its real value. At the moment we have allowed the value of alternative healthcare to become bound up with the price tag it carries in the healthfood shop or the profit it can make for practitioners and manufacturers. And yet there is so much more to take into account when assessing the value of a thing. Let's open our eyes to all that alternative methods have to offer. Perhaps they cannot cure cancer; but if they can provide relaxation and a good night's sleep for a person suffering with cancer, without producing adverse side effects, that is a substantial step forward.

Another way to minimise disappointment is to look at our own expectations of therapy and the baggage we sometimes bring with us to alternative medicine. Alternative medicine is now a big consumer business and many people approach the selection of alternatives as they would any other shopping trip – with a big symbolic shopping trolley into which they collect all the latest therapies without giving much consideration as to how they work or what they are best used for.

You cannot be held responsible for the way in which some practitioners run their clinics or the aggressive and sometimes downright dishonest way in which some alternative remedies are marketed. But you can learn to think about healthcare as a consumer instead of as a patient. This means making yourself aware of the nature of illness and the total picture of health. It means acknowledging the parts our minds and emotions play in the way our physical bodies behave. It means being aware of (and fighting off) the very human tendency to want to switch off and leave it to the experts. It means choosing healthcare that suits your personality

and your needs and saying no to those which don't (even if they come highly recommended by friends and relatives).

Becoming an intelligent consumer is one of the best ways to avoid disappointment with medicine of any kind and my hope is that this book will provide a springboard from which you can launch yourself on the road to confident and reasonable alternative choices in healthcare.

# Acknowledgments

I had the ironic experience of writing a portion of this book while recovering from a disabling bout of pneumonia, so special thanks go out to my family, friends and colleagues who were so patient and supportive during and after this event. I am grateful as always to Lynne McTaggart and Bryan Hubbard at *What Doctors Don't Tell You* and *Proof!* for continuing to provide a platform for my writing, for being stimulating sounding boards against which to test theories and opinions and for providing such a valuable and necessary service to health consumers everywhere. Gratitude and love go to my agent Laura Longrigg – it's been a wild year. Thank you. I am also indebted to Eveleen Coyle and all at Gill & Macmillan who have been so supportive of me and have comprehensively restored my faith in book publishers. Finally to my son, Alexander, who has borne so much with admirable patience during this year: yes I am finished and, yes, let's break out the Scrabble board and plug in the Playstation.

# Author's Note

This book focuses on the most common and widely available types of alternative healthcare. It also focuses on those for which there is some kind of research evidence.

There are many types of alternative healthcare available and more are being invented every day. While proponents claim major differences between therapies, a closer look reveals that very often they are merely variations on a theme (the many different types of massage are a testimony to this). Throughout this book where one therapy overlaps with another I have indicated this in bold italics. For example, if you are interested in homeopathy, you may also wish to read the information on other types of energy medicine such as ***spiritual healing***. My hope is that this may help readers to understand more fully how and why certain types of therapies work and what they may be best used for, and also that it will assist individuals in finding the best alternative to suit their needs.

Certain practices which are no longer considered 'alternative', such as psychotherapy, have not been included. In addition, I have chosen not to include a separate section on 'nutritional therapy' as this rarely has anything to do with nutrition (which most practitioners, both conventional and alternative, would agree is the foundation of health) and instead is usually focused on the prescription of single supplements. While there is evidence that certain supplements can aid health under some circumstances, research into single supplements can be misleading suggesting that one nutrient is more important than others, and missing the synergistic actions of nutrients in the body entirely (and this, in turn, is a topic too big for a book of this type). Information on the importance of nutrition can be found in the introductory chapters as well as under ***naturopathy***.

Part I

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# Getting Down to Basics

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# Chapter 1

## Santé

**A**chieving good health is now one of the single biggest preoccupations in modern society. You may have bought this book because you are interested in better health and feel that alternative medicine may hold the key. Maybe it does. But there is something else you may wish to consider first: what exactly is good health? In typical Western fashion we appear to be pursuing something without giving much thought to what it is, what it represents in our lives and how it is best achieved.

In fairness, people have been struggling with this question since the days of the earliest physicians. Clearly good health is more than just the mere absence of illness or uncomfortable physical symptoms; for if it was simply a matter of a well-behaved body how could it be that some individuals, for instance those dying of cancer, often report feeling a profound sense of well-being?

Fifty years ago scientists at the World Health Organization attempted their own definition. Health, they said, was a 'state of complete physical, mental and social well-being'. Given that this all encompassing state of wholeness is difficult to achieve, this definition met with mixed reactions from health professionals. In fact, one physician commented at the time that the only people he had known who were in that state were either manic or about to have a heart attack!

Differences in the philosophical definition of health are not solely what prevent us from seeing the bigger picture of health. Other more pragmatic issues also cloud our vision. We are, for instance,

hampered by the way scientists study health and disease, reducing the body to a mechanistic series of causes and effects. We are also hampered by the fact that our doctors – the self-appointed guardians of public health – never study health in medical school. Instead they study disease, often in the way a general might study an enemy, continually looking for new strategies to eradicate it at all costs.

Conventional medicine has also gone down the road of specialisation; and while this has led to a better understanding of individual aspects of health and disease, it has also led to defining patients as collections of separate body parts and systems. Carving people up in this way means that the physician rarely sees his patients as whole individuals and is often oblivious to the continual interactions of the various body systems. For instance, the central nervous system is connected to the endocrine (hormonal) system and this in turn influences the emotional sites in the brain. The stomach and digestive tract are increasingly referred to as the 'second brain' and emerging research shows that this area of the body has a complex network of nerves, the enteric nervous system, similar to that of the central nervous system. These two nervous systems are constantly interacting, which may be one reason why, when your digestion isn't functioning well, your emotions may also be out of balance.

Modern medicine often congratulates itself on the fact that we are living longer than ever. But in celebrating the miracle of modern longevity we miss some crucial points about the nature of health and disease. It is not advances in medicine but in hygiene, housing and nutrition that have made the greatest impact on our longevity.

What is more, while we are living longer we are not living healthier or better. In spite of our increased longevity, a growing number of people in their prime report a lack of vitality and vague symptoms that they cannot pin down, symptoms such as insomnia, digestive problems, headaches, respiratory complaints, feeling run down, depressed and being susceptible to every 'bug' that is going around.

Such people are suffering from what US health expert Dr Jeffrey Bland calls 'vertical ill health'. They are not sick enough to take to

their beds (and become horizontally ill), but they lack vitality. Worse, because so many of the people they know suffer from the same complaints, they consider these things part of the 'normal' human condition.

To combat this vague unwellness conventional medicine offers a variety of different drugs to help us stay vertical such as antidepressants, decongestants, antacids and painkillers. In addition, many of us prop ourselves up with other things like alcohol, caffeine and nicotine and more recently 'energy' drinks (which are caffeine under another name) and herbal remedies such as guarana (also caffeine) and ginseng. But of course these things simply produce more adverse symptoms (which again most of us regard as 'normal').

### **Medic or physician?**

Right up to the Renaissance the health profession was not called medicine. Instead it was called *physic* (from the Greek word *physis* or nature). Physicians were professors of *physic* and trained in the philosophy of nature. The word medicine is taken from the Latin *medico*, literally I drug. Treating disease with drugs was only a small part of the physician's work and the least-respected way of dealing with illness. Today drugs, along with enterprising new surgical techniques, are the main ways in which doctors 'care' for patients.

### **Enter alternative medicine**

This book is, in part, about the way alternative medicine can be used to bring balance back to our view of health. Once considered a fringe interest, studies in both the UK and the US now show that more than 40 per cent of healthcare consumers will turn to alternative medicine before they will go to a conventional doctor. Visits to alternative practitioners have increased dramatically across the Western world.

Conventional medicine's failure to deliver 'good health' has motivated many individuals to take charge of their own health and has spawned an unprecedented interest in alternative healthcare.

Readers may be wondering at this point about the use of the term 'alternative' as opposed to 'complementary'. The choice is deliberate