The Janus Corner

This occasional section within the journal surveys visions and achievements, often not on the main track of the developing biomedical sciences, but all relating to discoveries and developments of medicinals – both ancient and modern. What they have in common, in one way or another, is providing further background and glances around the edges of the core discipline of pharmacognosy, as it has been and continues to evolve within our times.

“Medical Myths and Health Lies that are Killing us” by Peter Dingle (2014)

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Peter Dingle is a great communicator not afraid to tackle the ethos and behaviour of Big Pharma, the massive food conglomerates and other vested interests putting profits well before matters of long-term public health, safety and wellness.

The book has 26 chapters listed in Appendix 1 plus an introduction (10 pages) and a lengthy preface (15 pages). Several chapters eg 11 through 15 expose the untruths so frequently associated with the delivery and promotion of medicines. Concerning polypharmacy, he notes that ‘each extra drug that we might take virtually doubles the risk of serious side effects and death’ (p.19). Other chapters particularly 16 through 25 examine the fallacies associated with much nutritional advice, based on bad data and no real supportive evidence. Thus salt and saturated fats have been declared ‘pathogens’ by our medical educators, when in fact the real problem may be that (i) too little salt can have greater adverse effects on health than too much salt (p175) and (ii) many processed unsaturated fats, promoted as healthy replacements for (unprocessed) saturated fats, are sources of toxins eg transfatty acids and/or deficient in natural lipophilic vitamins (A,D, E and K).

Overall, it is an incisive survey of how much the contemporary medical ‘wisdom’ is managed by the pharmaceutical and food companies to the detriment of public health. These business consortia can be quite ruthless in dealing with objectors and genuine truth-sayers, as the author describes so clearly in the preface and again in the final chapter. It is a sad fact that the old classical practise of ‘shooting the messenger who brings bad news’ is very much alive and well in these days of supposed enlightenment. It is not just a question of who is right or wrong or even about strategies in drug delivery that provide optimal returns for investors. There is a
lack of principle that allows sloppy clinical science, powerful propaganda and other forms of media manipulation to over-rule the best interests of human and animal health. This has been noted by former editors of two highly respected medical journals1 2 and other thoughtful commentators.3 4

The first chapter in Part I is entitled ‘Medicine has become dogma’. It is preceded by a preface entitled ‘Don’t shoot the messenger’ which records the author’s harrowing experience of being off-side with the establishment (medical, political, media).

Some paradoxes extracted from chapter 2:

• The countries that spend the most money on health have the sickest populations (p.17);
• Many people are now on multiple drugs and have never felt worse (p.17);
• The third biggest killer in Western nations is the medical ‘system’ (p.18);
• Iatrogenic disease, ie medically-induced disorders, is the third leading cause of death in the USA (p.18);
• Each extra drug that is taken virtually doubles the risk of serious side effects and death (p.19);
• All medications have serious side-effects, some of them more incapacitating than the illness for which they have been prescribed (p.20);
• Clinical trials are not designed to determined long-term side effects (p.20).

Other sobering insights, perhaps obvious upon reflection but so often lost amidst the barrage of medical propaganda, include:

• Advances in sanitation, increased food supply, improved access to water, and basic preventive medicine – not pharmaceuticals – led to gains in life expectancy during the 19th Century (p.22);
• Modern medicine tends to focus on prescriptive treatment of disease rather than health management and preventive avoidance of illness (p.24);
• Most iatrogenic deaths are due to undesired effects of drugs when taken at a normal dose (p.24);
• Starting down the right path with appropriate nutrition and lifestyle are important components of healthy aging and increasing your own life expectancy (p.26);
• There is little supporting evidence that antidepressants work when placebos appear to be just as – and in some cases more – effective (p.43);

The last chapter records a witch hunt against the author following his wife’s death (from cancer). He reflects on the level of inaccuracy and even deception in our modern press and the contempt the media have for the population. Too many journalists seems to be just public relations handlers for the powerful, a conclusion well attested by other commentators eg Ben Goldacre.5

This is in contrast to scientists asking difficult questions, some of which might even challenge existing paradigms. The last two sentences in this hard-hitting but elegant book are:

‘As long as we are not allowed to speak our truth then the public will suffer. I ask for no more than true free speech and the chance to continue to shed light on the truth.’

This is basically the honest scientist’s creed. My own comment is that it is truly a travesty when the science is ignored/manipulated/misreported, particularly when it involves the health and wellness of the greater global population. It is also an utter disgrace when society allows the vested interests (political, medical, commercial) to a) control the health agenda and b) contrive to destroy the credibility and careers of the messenger(s) bringing unwelcome news; just as in former barbaric times.

APPENDIX 1

TITLES OF THE CHAPTERS:
CHAPTER ONE: Medicine has become dogma
CHAPTER TWO: Myth: if we don’t treat the illness itself, we will need more drugs
CHAPTER THREE: Myth: Modern medicine has extended our lives
CHAPTER FOUR: Myth: The medical system is safe
CHAPTER FIVE: Myth: Cholesterol is bad for you
CHAPTER SIX: Myth: Antidepressants work
CHAPTER SEVEN: Myth: You cannot prevent or heal multiple sclerosis (MS)
CHAPTER EIGHT: Myth: It’s all in the genes
CHAPTER NINE: Myth: Most disease is genetic
CHAPTER TEN: Myth: Peanuts cause peanut allergy
CHAPTER ELEVEN: Myth: Medical doctors are not influenced by drug companies
CHAPTER TWELVE: Myth: Medical researchers have only our best interests at heart
CHAPTER THIRTEEN: Myth: Drug companies have only our best interests at heart
CHAPTER FOURTEEN: Myth: You can trust the public health advocates and foundations
CHAPTER FIFTEEN: MYTH: The media report medicine and health in a balanced and unbiased way
CHAPTER SIXTEEN: Myth: We don’t need to supplement
CHAPTER SEVENTEEN: Myth: We get all the nutrients we need in our food
CHAPTER EIGHTEEN: Myth: Nutrition standards are based on science
CHAPTER NINETEEN: Myth: Milk is good for your calcium and bones
CHAPTER TWENTY: Myth: Milk is good for you
CHAPTER TWENTY-ONE: Myth: Meat is good for you
CHAPTER TWENTY-TWO: Myth: Saturated fats cause heart attacks
CHAPTER TWENTY-THREE: Myth: Salt is bad for you
CHAPTER TWENTY-FOUR: Myth: Margarine is good for you
CHAPTER TWENTY-FIVE: Myth: Breakfast cereal is good for you
CHAPTER TWENTY-SIX: Myth: The final chapter – but not the last one

APPENDIX 2

A GLOSSARY TO HELP CLARIFY WHAT THIS BOOK IS ALL ABOUT

• Myth has several definitions including:
  (i) A story which attempts to explain natural phenomena
  (ii) Any invented story
  (iii) An imaginary or fictitious thing (or person)
  (iv) A collective belief that is built up in response to the wishes of a group, rather than an analysis of the basis of the wishes

• Lie, also has several definitions:
  (i) A false statement made with intent to deceive
  (ii) Something intended or serving to convey a false impression
  (iii) To speak falsely or utter untruth knowingly (as with intent to deceive)
  (iv) To express what is false.
Propaganda may mean:
(i) The systemic propagation of a given doctrine
(ii) Dissemination of ideas or rumour for the purpose of injuring (or helping) an institution, a cause or a person.
(iii) Doctrines, arguments, facts spread by deliberate effort to further one’s cause or damage an opposing cause [which may express the actual truth]

Dogma is:
(i) Prescribed doctrine
(ii) A settled opinion: a belief: a principle

Iatrogenesis: An illness, real or imagined, caused or produced by diagnosis or treatment by a physician

Mis-information: Giving false or misleading information

Paradigm: A set of concepts, illustrations, etcetera shared by a community of scholars or scientists

Definitions from the Macquarie Dictionary

REFERENCES