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Dr Vernon Coleman's Health Letter

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Orthodox or Alternative? Which is Best?

An independent and personal assessment and evaluation of the comparative effectiveness of alternative and orthodox medicine in the treatment of ten common diseases.

When is orthodox treatment best? What can doctors offer if you want to avoid getting heart disease? Are the alternative remedies for irritable bowel syndrome better – or worse than the orthodox treatments? If you're suffering from anxiety is your doctor likely to offer more effective help than an alternative practitioner?

These – and questions like them – are questions which really matter. For this month's VCHL I have taken a hard, critical look at the ways in which orthodox and alternative practitioners claim to be able to prevent – and treat – ten of the commonest diseases.

This comparison of orthodox and alternative medicine is inevitably subjective to a certain extent. But I have based my conclusions on the available evidence and since I am not influenced by any outside forces (politicians, corporate interests or loyalty to any particular section of the healing community) I have made the study as objective as I possibly could.

To make it easier to read the study I have given both orthodox medicine and alternative medicine a general score at the end of each section. I do realise that individual practitioners will score very differently within these two categories; my scoring is intended to recognise the general value of the help available from practitioners.

I also added a score for 'self help' since while I was writing this piece it occurred to me that it is often possible for the informed individual to keep him/herself healthy (and to restore good health) far more effectively without professional help than with it.

Anxiety and depression

Prevention

Your doctor is unlikely to offer you any help in avoiding anxiety or depression. This is one of many areas of orthodox medicine where 'prevention' is a concept which really does not exist. Alternative practitioners are a little better. Some practitioners may offer stress counselling and relaxa-

tion therapy (both of which would undoubtedly help improve mental health and reduce the likelihood of both anxiety and depression) and others will offer nutritional advice which may be of value since there is no doubt that a poor diet can (largely through leading to a poor immune system) lead to an increased susceptibility to stress.

Score

Orthodox medicine: 0/10

Alternative medicine: 4/10

Self help: 7/10

Treatment

The commonest orthodox treatment for both anxiety and depression involves drug therapy. Tranquillisers are the usual choice for anxiety despite the fact that they offer only superficial, temporary support and can produce serious problems of their own. After the problems associated with tranquilliser use were acknowledged the pharmaceutical industry (and, therefore, the medical profession) concentrated their efforts on marketing antidepressants. It is for this reason that the alleged incidence of depression is rising fairly dramatically. Anti depressants do seem to help some patients but, once again, there are numerous side effects – some of them serious. For example, Prozac, commercially a hugely successful antidepressant drug is thought by some to be associated with several serious problems – including aggression and suicidal thoughts. Psychotherapy is the second most popular treatment for anxiety or depression but because of the high cost it is not available to most patients. This may not be too much of a disadvantage since there is some evidence to suggest that support provided by friends and acquaintances may be more useful under these circumstances than professional support offered by psychiatrists, psychologists or therapists. Surprisingly, perhaps, some doctors still recommend brain surgery for problems of this type. Patients who undergo destructive brain surgery may well behave differently (and may, therefore, be thought to have been ‘cured’ of their anxiety or depression) but my personal view is that this type of treatment is unacceptable. Chopping patients heads off would undoubtedly stop them feeling anxious or depressed but this is not a remedy I would recommend. (Absurdity is a

strange concept in the world of medicine. There are, as I have explained before and as I mention below, many surgeons around these days who remove women’s breasts in order to stop them getting breast cancer.)

Alternative therapies for depression are mostly gentle, and seem relatively free of side effects, but they do seem to me to be probably just as effective (if not more so) than orthodox remedies. The effectiveness of the herb St. John’s Wort in the treatment of depression has been widely and well documented and other forms of alternative medicine which may prove effective include nutritional therapies (including vitamin supplements), relaxation exercises, homoeopathy and ta’i chi.

Naturopathy (usually recommending a low intake of caffeine and alcohol and a decent intake of complex carbohydrates to stabilise blood sugar levels), hypnotherapy, relaxation exercises, meditation, massage and homoeopathy are forms of alternative medicine which may be useful in the treatment of anxiety.

Score

Orthodox medicine: 3/10

Alternative practitioners: 8/10

Self help: 8/10

Arthritis

Prevention

There is no orthodox prevention programme for arthritis. In the alternative medicine field the best prevention programme is the one offered by nutritionists who recommend a vegetarian diet. It has been proved that rheumatoid arthritis is less common among vegetarians than among meat eaters but, sadly, very few doctors who provide advice to their patients on the subject of arthritis consider this link worth mentioning. (This may be because they are not aware of it. This ignorance is best explained by the fact that most doctors obtain their postgraduate education courtesy of the pharmaceutical industry which is, not surprisingly perhaps, interested only in promoting the idea that drug therapy is the only sensible way of dealing with health problems and in advocating specific therapies within that genre.)

Score

Orthodox medicine: 0/10

Alternative practitioners: 6/10

Self help: 6/10

Treatment

The commonest orthodox treatment for arthritis involves drug therapy – usually with non steroidal anti inflammatory drugs. The best established (and possibly the most effective) drug for the treatment of arthritis is aspirin but this drug is not widely used partly because it is out of patent (and therefore made very cheaply by a large number of companies) and partly because it has acquired a bad reputation for causing stomach problems. Ironically, however, new (and invariably much more expensive) variations on this pharmacological theme usually turn out to cause similar symptoms when they have been on the market for a few years. The drug industry gets round this problem by producing a constant stream of new products. It is worth noting that soluble aspirin is much less likely to cause stomach problems than aspirin of the non soluble variety. Cynics will not be surprised to hear that it is not unheard of for drug companies to ‘test’ their new products against non soluble aspirin (the type most likely to cause stomach problems) when attempting to show that their latest wonder drug is an improvement on the traditional benchmark remedy.

Drug therapy can help relieve some of the pain and stiffness associated with arthritis but that’s about it. Astonishingly, most doctors are still unaware of just how effective TENS machines can be in eradicating the sort of pain suffered by patients with arthritis. Actually, it probably isn’t all that astonishing since drug companies around the world have, over the years, worked pretty hard to make sure that doctors continue prescribing drugs (very profitable for drug companies) and don’t recommend TENS machines (no profit at all for drug companies). Surgery is the second most popular orthodox treatment for arthritis. The replacement of arthritic joints has become big business and seems destined to become an even bigger money-spinner in the future.

There are numerous ‘alternative’ remedies for arthritis but (unless you count the TENS machine as an ‘alternative’ remedy) the best of

them are probably no better than the remedies offered by orthodox practitioners. Acupuncture may help relieve the pain of arthritis but it won’t cure it any more than drugs will. Other useful alternative treatments for arthritis include nutritional ones (such as those advocated by naturopaths). Cutting out meat and fat and increasing the intake of fruit, vegetables and wholegrain cereals is likely to help. Hydrotherapy (regulated exercise in water) can help when joints are swollen or painful and homoeopathy may also prove useful.

Score

Orthodox medicine: 5/10

Alternative practitioners: 6/10

Self help: 7/10

Asthma

Prevention

Doctors claim that there has been an explosion in the incidence of asthma in recent years. You might, therefore, imagine that the medical profession would be looking for ways to prevent asthma. You would be disappointed. It is usually claimed that asthma is becoming commoner because of the pollutants in the air we breathe. I’m not entirely convinced by this argument. After all, our air has been polluted for a long time. I rather suspect that what is happening is that asthma is simply being diagnosed more enthusiastically because doctors are being pushed to prescribe anti-asthma drugs. If a child visits a doctor with a wheeze the doctor will diagnose asthma and start a treatment programme which may well last for life. This is patently absurd but nonetheless enormously profitable.

Some doctors do perform skin tests in a search for allergens which might be responsible. But most don’t bother.

The best way to prevent asthma is, I believe, to teach people how to relax. Much asthma is stress-related and learning how to relax when under pressure is an excellent way to abort a potential asthma attack. Sadly, the orthodox medical profession hardly ever bothers to do this. Some alternative practitioners do.

It is also important to remember that

asthma can be caused by house dust mites, dander (tiny pieces of animal hair, skin and feathers), tobacco smoke, exhaust fumes and mould. Some food additives can also cause asthma. Good practitioners advise that the best way to avoid these varieties of allergic asthma is to avoid the allergens. Regretfully, alternative practitioners of various kinds are more likely to make this type of recommendation than are orthodox practitioners.

Score

Orthodox medicine: 1/10

Alternative practitioners: 6/10

Self help: 6/10

Treatment

Inhalers which contain drugs which dilate the air passages (broncho-dilators) are the cornerstone of orthodox treatment for asthma. Steroids are also popular – despite the possible side effects. There is no doubt that inhalers can be extremely effective – and as a result many users become very dependent upon them (the dependence is psychological rather than physical but nonetheless the real for that). But are inhalers always necessary? I don't think so. Many patients over-use them and are encouraged to overuse them by over-prescribing. Indeed, my fear is that the damage done by these drugs may outweigh the useful effects.

There is, in comparison, good evidence showing that asthma sufferers who are taught how to relax can deal very effectively with their symptoms, without any risk of side effects.

I have seen children and adults suffering from quite serious asthma make remarkable recoveries when helped to relax and I have no doubt that if more patients were taught to relax the need for inhalers would drop dramatically. (But so would drug company profits of course.)

Score

Orthodox medicine: 5/10

Alternative practitioners: 6/10

Self help: 6/10

Cancer

Prevention

The original and traditional orthodox medicine approach to preventing cancer was to create a new speciality which, perhaps not surprisingly, involved patients handing over fairly vast amounts of money to be 'screened' at regular but artificially defined intervals. The evidence suggests that this type of preventive medicine programme probably did more harm than good – except to the bank balances of the doctors and health companies organising it. One problem is that selective screening not infrequently produces false positives – which results in patients receiving therapy they don't need. Another problem is that screening programmes may create health problems of their own. (For example, X ray screening increases the risk of cancer developing and there has to be a serious risk that mammography, for example, may increase the risk of women developing breast cancer.) A third problem is that individuals who are screened annually may be imbued with a false sense of confidence – and may, therefore, ignore warning signs which they would have otherwise noticed. Recently, the drug industry and the medical profession have combined to create a new and even more profitable form of preventive medicine which involves the prescribing of powerful drugs which are intended to prevent cancer developing. Doctors and their drug company paymasters have realised that if they can persuade millions (?billions) of patients to take drugs regularly in order to reduce their chances of developing a specific illness the profits will be spectacular – even by drug company standards. The best known drug in this new category is tamoxifen. Women are being encouraged to take the drug to reduce their chances of developing cancer. When I first found out about this new development five or six years ago I warned that tamoxifen is known to cause uterine cancer. This revelation was acknowledged but dismissed by doctors and drug companies. Other side effects associated with tamoxifen are so significant that it is not uncommon for doctors to prescribe additional drugs to help alleviate them. Few orthodox doctors, or drug company representatives, seem to think it odd to give a perfectly healthy woman a cancer causing drug to prevent cancer – and to then give another poten-

tially harmful drug to alleviate other side effects.

Next, I must also mention that some surgeons have now moved into the world of 'preventive medicine'. It is becoming common for surgeons to remove healthy breasts from healthy women on the grounds that if there is no breast there then breast cancer is unlikely to develop. Readers who are unaware of this development may be surprised to hear that this strange and unusually aggressive form of preventive medicine is becoming extremely popular. (There is a precedent for there were surgeons around in the 19th century who used to remove lengths of bowel in order to prevent problems in that area of the body. In addition, it has long been popular in some surgical circles for doctors to remove lengths of bowel from patients wishing to lose weight. Without essential pieces of bowel nutrients aren't absorbed and the patient loses weight. Sadly, the patient also loses essential nutrients and may die but that is, I believe, considered an acceptable risk.) Finally, of course, some doctors do make some effort to persuade patients who smoke to give up or reduce their consumption of tobacco (known to be a carcinogenic substance).

The alternative approach to preventing cancer is, it seems to me, considerably more logical than the so called 'orthodox' approach which I have described.

We now know what causes 80% of all cancers and the main thrust of the approach advocated by the best alternative practitioners is to suggest to people who wish to cut their risk of developing cancer that they avoid as many carcinogens as possible – and that they should adapt their lifestyle in such a way as to minimise their chances of developing cancer. (Written down this sounds absurdly simple and it is difficult to believe that most members of the medical establishment would classify this approach as controversial.)

Apart from tobacco (virtually the only recognised carcinogen to be accepted by the medical establishment) the other known cancer inducing substances include a number of widely consumed foods. It is, for example, now proven beyond any shadow of doubt that meat causes cancer. There is also evidence showing that a high fat diet increases the risk of cancer developing. Removing meat and excess fat from the diet should, therefore, reduce the cancer risk. It is

also known that eating more fruit and vegetables provides a good deal of protection against cancer and there is evidence to show that individuals who are overweight are more likely to develop cancer.

This lifestyle approach (based on existing clinical evidence) is so logical that it seems rather bizarre to have to acknowledge that it is still regarded as 'alternative' and, indeed, rather revolutionary. Good alternative practitioners will advise their healthy patients to avoid the foods which are known to cause cancer.

Cancer rates continued to rise throughout the twentieth century (and seem certain to continue to rise in the twenty first century). It would be hard to find more convincing evidence proving that the orthodox approach to preventing cancer has failed dismally.

Score

Orthodox medicine: 0/10

Alternative medicine: 8/10

Self help: 9/10

Treatment

The orthodox approach to the treatment of cancer consists of three separate types of therapy: chemotherapy, radiotherapy and surgery. The effectiveness (or otherwise) of this approach is easily measured by studying survival rates. And, as with preventive medicine, the evidence shows that the medical establishment has been appallingly unsuccessful.

Chemotherapy is one of the great health scandals of our time. Although hugely profitable for the pharmaceutical industry the evidence strongly suggests that, for the majority of cancers and the majority of patients, chemotherapy simply does not work. Indeed, I am convinced that because of the damaging effect it has on the immune system chemotherapy probably does more harm than good for many patients. There are occasions when chemotherapy is of value but I have no doubt whatsoever that if chemotherapy was an 'alternative' remedy it would have been banned as unsafe and ineffective. Doctors persevere with chemotherapy because they are taught (by the drug industry) that it is the most effective way to tackle cancer. Radiotherapy and surgery are equally controversial and although there are times when both can be of use the fact is that if

they were ‘alternative’ remedies they too would have almost certainly been banned on the twin grounds of danger and ineffectiveness.

There are numerous alternative remedies for cancer available. But the basic principle of all the successful therapies I’ve found has been a low fat, vegetarian diet which includes plenty of vegetables and plenty of fruit – preferably consumed as juices. The evidence I have seen has convinced me that this dietary approach – either alone or with other therapies – is the most effective way to defeat cancer. And there is a logical explanation for this therapy since the high vitamin content of fruit and vegetables would boost the body’s immune system.

The dietary approach to the treatment of cancer isn’t the only type of therapy that works. Visualisation is undoubtedly also effective and is one of the most effective alternative solutions. As I showed in my books *Bodypower* and *Mindpower* back in the 1980s (now both published by the European Medical Journal) it is possible to defeat cancer by imagining that your body is full of cancer eating cells.

Score

Orthodox medicine: 1/10

Alternative medicine: 8/10

Self help: 8/10

Eczema and Dermatitis

Prevention

A few orthodox practitioners may encourage susceptible patients to avoid irritants likely to cause eczema or dermatitis. But the vast majority do not – even though it isn’t difficult to compile a short list of the most likely causes (nickel, rubber, sticking plaster, chemicals, household plants etc. are causes of allergic contact eczema, eggs and dairy produce can cause allergic eczema, oils can cause occupational eczema, soaps, detergents and urine can cause irritant eczema). There will be exceptions but I doubt if the majority of alternative practitioners are much better than the majority of orthodox practitioners. However, individuals who take care to avoid allergens and irritants will be able to protect themselves quite effectively.

As a footnote it is worth drawing attention to the fact that some cases of eczema may be

produced by drugs (such as penicillin and sulphonamide) which have been taken by mouth. Doctors could, therefore, prevent a good deal of eczema by limiting their over-prescribing.

Score

Orthodox medicine 0/10

Alternative medicine 0/10

Self help 6/10

Treatment

The orthodox treatment for eczema and dermatitis usually involves a steroid cream. The patient has a rash and so the doctor reaches, almost on a reflex, for his prescription pad and scribbles out a prescription for an appropriate tube of cream. Such creams will often prove effective – in the short term – but they do not, of course, deal with the underlying cause of the problem.

Orthodox practitioners can probably produce a miracle result more speedily than alternative practitioners but good alternative practitioners who spend a little time trying to find a cause for an attack of eczema will be much more likely to find a permanent solution. In practice most people will be able to solve this problem just as quickly as any alternative practitioner.

It is, incidentally, worth remembering that the sort of creams usually favoured by orthodox practitioners can actually cause eczema if used for too long.

Score

Orthodox medicine: 5/10

Alternative medicine: 8/10

Self help: 8/10

Headaches and Migraines

Prevention

Headaches are among the commonest of all health problems. And yet I doubt if most doctors ever give a thought to their prevention. The orthodox medical paradigm just doesn’t regard prevention very seriously. The vast majority of headaches are ‘tension headaches’ – caused by stress and anxiety – and it shouldn’t come as much of a surprise to anyone that the best way to prevent headaches of this type is to learn how to deal with stressful situations more effectively. Learn how to spot when you are under too much

pressure, and know how to wind down or shut yourself away from the pressures of a difficult world, and you should suffer far less from stress related tension headaches. Learning how to relax your mind (and your body) isn't particularly difficult. It is a skill which (like dancing, driving a car or playing golf) needs to be learned. What a pity it is that doctors seem to be too busy to teach patients how to do these things. Fortunately, there are some alternative practitioners around who are enthusiastic about teaching their patients these skills. Most important of all these are skills which can be learned at home without a practitioner of any kind.

Migraine headaches are often linked to specific foods or to other lifestyle factors and they can, therefore, be prevented more easily than other types of headaches. Doctors will (occasionally) provide their patients with a list of possible triggers (cheese, chocolate and tobacco smoke are examples of known triggers).

Score

Orthodox medicine: 1/10

Alternative medicine: 6/10

Self help: 7/10

Treatment

Visit a doctor complaining of a headache and he will almost certainly reach for his prescription pad, scribble for a moment and send you off to the local pharmacy to pick up a bottle of pain killers. There is no doubt that pain killers will probably help. But they won't do anything to deal with the cause of the headache. They won't help you to deal with the problem yourself. And they won't help you avoid the problem occurring again. Giving a patient a pain killer to deal with a headache is like giving a motorist a bucket of water when his radiator is steaming. It's a short term solution. When headaches persist, recur or are in some other way clearly out of the ordinary, doctors can do a good job in helping to make a diagnosis. But in the treatment of routine headaches orthodox doctors are pretty useless.

Massage, acupressure, homoeopathy and relaxation therapy are just a few of the alternative methods which may work in the treatment of headaches.

But the nature of the disorder means that

self help offers by far the best approach. Self help treatment for headaches doesn't simply involve taking the top off the soluble aspirin bottle and popping two into a glass of water. Learning to relax, mastering the simple art of fingertip massage and controlling your exposure to stress are all crucial. Visualisation is a simple but effective way to deal with migraine. (I describe the technique in my book *Bodypower*.)

Score

Orthodox medicine: 3/10

Alternative medicine: 6/10

Self help: 9/10

Heart disease

Prevention

Doctors do make some effort to prevent heart disease but readers may not be too surprised to hear that most doctors regard drugs as the best way of doing this. There are, for example, a number of cholesterol lowering drugs available and these are widely prescribed – much to the financial benefit of the drug companies which make them. Whether these drugs are effective is another question. And I certainly don't think that drugs of any kind are the best way to prevent heart disease. Numerous studies have identified the causes of heart disease. They include: too much stress, too much weight, too much alcohol, cigarette smoking, a fat rich diet, too little exercise and so on. Simple lifestyle changes can dramatically alter an individual's chances of developing heart disease. Alternative practitioners who can perform effectively in this area usually do so by recommending these life style changes.

Score

Orthodox medicine: 2/10

Alternative medicine: 6/10

Self help: 9/10

Treatment

The orthodox treatment of heart disease usually involves either drugs or surgery – or a mixture of both. And yet there is clear evidence to show that drugs and surgery are not the best way to deal with heart disease. If doctors were true scientists

and were genuinely devoted to offering their patients the best remedy for their problem then they would offer patients the type of solution tested and proven by Dr Dean Ornish and his colleagues. Dr Ornish, whose work I have featured several times in VCHL, has shown that patients with heart disease can be cured by a programme consisting of a mixture of exercise, a low fat vegetarian diet, stress reduction and counselling. The research he has published is totally convincing. Some of this programme can be followed at home by any intelligent reader although I have to warn patients that they should not stop medical treatment without first discussing things with their doctor, that I do not recommend that anyone begin treatment for a heart condition without first obtaining advice from a qualified medical practitioner and that it is vital that anyone planning to do this should first check with their doctor that the approach is appropriate for them. Medically approved and supervised self help can be tremendously effective. Any doctor who insists that the only way to treat heart disease is with drugs or surgery is incompetent and should be promoted to cleaning out the waiting room lavatories. Although Dr Ornish and his colleagues are orthodox-trained medical practitioners I don't feel I can include his treatment programme in my assessment of orthodox medicine since most doctors still prefer to recommend drugs or surgery. Alternative solutions for heart trouble include those offered by naturopathy, relaxation therapies, meditation and t'ai chi.

Score

Orthodox medicine: 2/10

Alternative medicine: 5/10

Self help: 8/10

High Blood Pressure

Prevention

High blood pressure is one of the easiest diseases to prevent. Too much stress, too much weight, too much fat in the diet – all these are among the avoidable factors. Some doctors make an effort with some of their patients. But most orthodox doctors don't even bother to take routine blood pressure measurements – let alone give their healthy patients advice on how to avoid high blood pressure. Some alternative practitioners

(particularly those with an interest in relaxation therapies and good nutrition) may teach patients how to avoid this problem. But this problem is best dealt with without any professionals.

Score

Orthodox medicine: 0/10

Alternative practitioners: 4/10

Self help: 9/10

Treatment

The orthodox approach to the treatment of high blood pressure usually involves drug therapy. High blood pressure is one of the diseases drug companies love. Once a patient has high blood pressure he will (unless he makes changes to his lifestyle) usually have it for life. That means that he will need pills for life. Drug companies love disorders like this. Drugs used in the treatment of high blood pressure frequently do bring the blood pressure down but they often cause unpleasant side effects. T'ai chi, meditation, visualisation and naturopathy are all varieties of alternative medicine which can prove effective. But the best way to tackle this problem is often to make lifestyle changes. (Patients – particularly those already receiving orthodox therapy must talk to their doctor before making any lifestyle changes because the effectiveness of lifestyle changes can be so dramatic that medication may need to be altered.)

Score

Orthodox medicine: 3/10

Alternative practitioners :5/10

Self help: 8/10

Irritable Bowel Syndrome

Prevention

Neither doctors nor alternative medicine practitioners do much (or, indeed, anything) to help individuals avoid irritable bowel syndrome. The sad truth is that many alternative practitioners aren't much better than orthodox doctors at telling patients how to stay healthy. The reason for this is obvious: both alternative practitioners and orthodox doctors get paid for treating sick patients, and (for historical reasons which I explain in my book *The Story of Medicine*) they

usually get paid for prescribing a specific remedy – whether it is a drug, a massage, a needle or a herb. Alternative medicine and orthodox medicine are both variations on the same interventionist theme. Having said this some alternative practitioners do recognise that IBS is usually caused either by stress or by dietary problems.

Score

Orthodox medicine: 1/10

Alternative practitioners: 3/10

Self help: 8/10

Treatment

Orthodox doctors, and most alternative practitioners, fail to offer IBS sufferers particularly good advice. Most are too keen to sell a product of some kind – even though the answer to IBS may be rather simpler than this practice might suggest. The fact is that IBS is usually caused by either stress or a diet problem. It isn't possible to cure irritable bowel syndrome but it is usually possible to control it by teaching the patient how to deal with these two different problems. (Stress is best countered by reducing the exposure to unnecessary stresses while at the same time learning to relax and improving the ability to deal with stress. Dealing with the dietary link usually involves such simple remedies as cutting out dairy produce, reducing the fat intake and increasing the intake of water.)

Orthodox doctors prescribe a wide range of pills for IBS sufferers. If a patient suffers from diarrhoea then a doctor will prescribe a pill to treat the diarrhoea. If the patient suffers from constipation a laxative will be prescribed. Antispasmodics are popularly prescribed, as are medicines containing peppermint or charcoal (products which are also popular with alternative practitioners).

Many alternative practitioners are really no better than orthodox doctors when it comes to the treatment of irritable bowel syndrome. Many have a remedy to offer but relatively few offer 'lifestyle' advice which will really make a difference. Prescribing peppermint or charcoal may well help deal with the symptoms (and that can be very welcome) but won't reduce the incidence or extent of the irritable bowel syndrome.

Score

Orthodox medicine: 2/10

Alternative medicine: 2/10

Self help: 8/10

Osteoporosis

Prevention

Most orthodox medical practitioners don't seem to understand how osteoporosis develops. They do very little to prevent it. Nor am I particularly impressed by the ability of alternative practitioners to help prevent osteoporosis. Individuals can, however, do a great deal to protect themselves from this problem. There are extensive notes on building strong bones and avoiding osteoporosis in my European Medical Journal special report on the subject (available from Publishing House). This report is based on VCHL Vol 3 No 5.

Score

Orthodox medicine: 0/10

Alternative medicine :0/10

Self help: 9/10

Treatment

Generally speaking orthodox medical practitioners are as terrible at treating osteoporosis as they are at preventing it. Many believe the myths about osteoporosis which have been sustained by those with corporate interests to promote. Most alternative medical practitioners aren't much better than orthodox practitioners at treating osteoporosis. The self help solution is, in my view, the best answer. Osteoporosis is a nasty disease but it is largely created and sustained by our way of life. As with so many other disorders our modern 'in a bottle' solutions often simply add additional problems to existing ones. The best way to avoid osteoporosis, and to deal with it, is to be aware of the real causes and to do something about them. Osteoporosis is yet another lifestyle disease which can best be avoided and conquered through a change in lifestyle.

Score

Orthodox medicine: 0/10

Alternative medicine: 0/10

Self help: 9/10

Conclusion

My general conclusion is that orthodox medicine has lost its way. The advice offered by doctors is too often self-serving. Too many practitioners offer only what they have been taught to offer (usually by drug companies) – and fail to read around their subject. Drug companies aren't interested in teaching doctors how to use non drug remedies and they aren't interested in defeating disease.

Why should they be?

Drug company profits depend upon large numbers of the population remaining permanently sick. If drug companies taught doctors how to teach their patients to stay healthy they would put themselves out of business. And as I have explained elsewhere large international corporations have a life, a purpose, a need and a morality of their own. The people who think they run these companies think they are in charge but they aren't.

Alternative practitioners aren't immune to criticism either. Many who call themselves 'holistic practitioners' are no more 'holistic' than surgeons or radiotherapists. The herbalist who claims to be able to treat every ailment that comes his way with herbs is not a holistic practitioner. The acupuncturist who sticks rigidly to his needles is as narrow minded as any prescription scribbling general practitioner.

The branch of alternative medicine which seems to me to be closest to a truly holistic approach is naturopathy. Naturopaths emphasise a number of nutritional approaches which have been proven to be effective (and they sometimes recommend chocolate as a mood enhancer which is pretty darned sensible of them).

A careful analysis of the prevention and treatment programmes available suggests to me that the vast majority of the health problems affecting individuals living in the developed world could be prevented, or treated, with a change in lifestyle. (Disorders affecting individuals in the developing world are different since many are infective in origin and others are related to an inadequate diet.) When I had finished writing this study even I was surprised at the extent to which lifestyle factors influence our health. And I was surprised at the way in which

both doctors and alternative practitioners tend to ignore these factors.

A healthy immune system is the key to good health in our modern world and yet most people do everything they possibly can to batter and weaken their immune systems. And neither doctors nor alternative practitioners do much to counteract this dangerous trend. The tragedy is that doctors are keen to push pills, acupuncturists are keen to push acupuncture, herbalists are keen to push herbal remedies and so on. Truly holistic medicine is a rarity and encouraging people to make lifestyle changes isn't a very profitable occupation.

More About Vaccines

As each week goes by it becomes steadily clearer that my long held view that vaccines are unacceptably dangerous is the right one.

I have been publishing the truth about vaccines for thirty years. I've been abused and sneered at by doctors, health visitors and others who've accepted government propaganda rather than facts.

The evidence convinces me the hazards associated with vaccination exceed the benefits. I believe anyone who claims all vaccines are safe, effective and free of side effects is dangerously ill informed.

That is my personal view, based on my expert appraisal of the facts, but I accept parents have the right to accept the risk of vaccination.

Equally, I believe parents have the right to say 'no' to vaccination.

However, thousands of parents have complained to me that they've been harassed because they dared to question the usefulness of vaccination.

But even I was shocked when I saw a letter recently from parents saying: 'Our solicitor informs us if we say no to vaccinations the local authority will take us to court and we will be accused of 'neglect'.'

'We are being...persecuted for questioning vaccinations', write these parents. 'We were given two choices. Our son had to go into care or we had to go to an assessment centre to assess whether we are suitable to be parents.'

This is outrageous and unacceptable.

Mass, enforced vaccination of children is a legalised child abuse.

Anyone who believes that all parents must have their children vaccinated should be kept away from children for life.

The arrogance and effrontery of bullies who want to force parents to have their children vaccinated is staggering. (Remember: some of those bullies make money out of vaccines.)

My special report on vaccines, now published by the European Medical Journal, is available free on my website www.vernoncoleman.com – or you can get a free copy (normal price £7.95) by sending a cheque/PO for £2.95 (to cover PP&H) to: Dr Vernon Coleman's Free Vaccine Report, Publishing House, Barnstaple, Devon EX32 9HJ. If you would like bulk copies at cost to distribute please contact Publishing House for a price. (Much of this report originally appeared in VCHL Vol 4 No 1.)

Ten Good Reasons Why You Shouldn't Trust Your Doctor

- 1 He/she will have almost certainly been educated by drug companies anxious to sell their products – regardless of the side effects.
- 2 He/she may not know who you are – and may confuse you with someone else.
- 3 He/she may be using you as a guinea pig in a clinical trial. If your doctor gives you a packet of tablets (instead of a prescription) then the chances are high that he's being paid to test out a new drug.
- 4 He/she may well be sadly out of date. Most doctors are out of date within five years of leaving medical school.
- 5 He/she may be an alcoholic or a drug addict. Few professionals turn to alcohol or drugs more often than doctors.

- 6 He/she probably has no idea what side effects may be associated with the drug he/she is prescribing.
- 7 He/she will almost certainly want to prescribe a drug for your symptoms – regardless of the fact that other methods of treatment may be both safer and more effective.
- 8 He/she may be relying on test results which are wrong – or which he/she simply doesn't understand. Errors involving tests and investigations are much commoner than most patients (and most doctors) realise. In VCHL Vol 3 No 12 I pointed out that most tests aren't as reliable, as useful or as necessary as most people think.
- 9 He/she may be depressed and in no fit condition to make a diagnosis or prescribe treatment. Mental illness is commoner among doctors than almost any other group in our society.
- 10 He/she may make treatment decisions based on his/her own religious beliefs – even though those personal beliefs mean that you do not receive the most appropriate treatment. The doctor is unlikely to tell you that his/her decisions are being affected in this way.

Twenty Facts About The Prostate Gland

- 1 The prostate gland is one of the male reproductive organs. It contains 20-30 small ducts which open into the urethra.
- 2 Much of the bulk of semen comes from the prostate gland.
- 3 The prostate gland is three sided and roughly pyramidal in shape. Its base lies against the under surface of the bladder.
- 4 The first part of the urethra runs through the prostate gland.
- 5 The prostate gland contains fibrous tissue and smooth muscle and feels firm to the touch.

- 6 Prostate gland secretions are alkaline and buffer the ejaculate against the acidity of vaginal secretions.
- 7 Benign (non cancerous) enlargement of the prostate gland is very common in men over the age of 50. It is the pressing of the enlarged prostate against the urethra which is likely to cause urinary tract symptoms (such as having to pass urine more often).
- 8 A healthy prostate is roughly the size of a walnut. But there is considerable variation in size.
- 9 The prostate isn't clearly divided into lobes but doctors refer to 'lobes' as a way of defining the part of the prostate to which they are referring. There is, allegedly, an anterior lobe, a posterior lobe, two lateral lobes and a median lobe.
- 10 If the prostate gland becomes infected it usually becomes enlarged and tender.
- 11 From the age of 9 onwards the prostate gland grows in response to increasing circulating levels of testosterone.
- 12 The prostate gland reaches adult size when its owner is in his late teens.
- 13 When the prostate gland becomes cancerous it usually feels very hard and often irregular.
- 14 The prostate gland may enlarge a good deal before its owner starts to notice any symptoms.
- 15 When an enlarged prostate gland presses on the urethra the urethra becomes narrower and the stream of urine becomes weaker. It then takes greater pressure to force urine out.
- 16 When the prostate gland is pressing on the urethra, and preventing urine from flowing out of the bladder, the bladder never really empties properly. At this point the owner of the bladder has to visit the lavatory frequently to pass small amounts of urine.
- 17 If the urethra becomes completely blocked the owner of the enlarged prostate will want to pass urine but will be unable to do so. Catheterisation may be necessary.
- 18 One possible cause of prostate enlargement in old age seems to be a less active sex life with few or no ejaculations.
- 19 The risk of obstruction seems to increase among men who smoke or drink excessively.
- 20 Some drugs (e.g. a variety of drugs obtainable on prescription) also increase the risk of obstruction. Men who have prostate enlargement and who are taking drugs of any kind (whether obtained on prescription or not) should ask their doctor if there could be a link between the two.

The Things They Say

'Perhaps 95% of clinical interventions have never been shown to improve health; some are worse than useless.' The Economist

'Scientists who conduct unnecessary experiments on animals should face criminal charges, according to most doctors.'

BMA News Review, 1993

'Whoever doesn't hesitate to vivisect will hardly hesitate to lie about it.'

George Bernard Shaw

'Much medical research is shoddy science and self-serving activity.'

The Lancet, 1993

'Fifty per cent of the things we do in medicine are right and 50 per cent are wrong. The problem is we don't know which is which.'

Physician quoted in the European Medical Journal

'Patients in Britain are still dying unnecessarily from operations that are organised in a rush by trainee surgeons at night.'

British Medical Journal, September 1993

'General practitioners fail to recognise half the cases of major depression they see.'

British Medical Journal, 1993

'Three-quarters of the country's surgeons still use hernia repair techniques which are regarded internationally as obsolete.'

Article in medical journal

'I used to work for a director of a big drug company. He always maintained that the company didn't want to find a cure for common ailments since they made a fortune from them.'

Former drug company employee

'I have in my car a long list of hospitals to which I would not want myself or a member of my family to be admitted.' Surgeon talking on British television

'I get up to 15 visits a day from representatives from pharmaceutical companies.'

GP complaining about pressure from drug companies to prescribe new products.

'There is no European Community or United Kingdom law which states that drug companies have to test their products on animals.' Former Under-Secretary of State, Home Office.

'Americans worry a great deal about the import of cocaine and other drugs into the US, but little is done to halt the far more deadly export of tobacco into the nations of the Third World.'

Historian and writer Robert N Proctor

'We don't hold much with talking to patients in this ward.'

A nurse

'No sensitive human being who has been in an abattoir would ever eat meat again.'

A vet

'Once I was home again...we decided to chuck nearly all the pills, so putting myself, as I was warned, 'at risk'. Within a few days I began slowly to improve...' Dirk Bogarde

Questions and Answers

Lives for Sale

Question

The son of a friend of mine was sent by his doctor to see a consultant about a possible brain tumour. He was told that he couldn't be fitted in for a scan for several months but that if he went privately it could be done almost immediately. Naturally worried the parents wanted to know the worst and for treatment to begin. The parents were told to take a cheque for two hundred pounds made payable to the private hospital and one hundred pounds in cash. The hospital receptionist took the cheque and told the parents to give the cash to the consultant.

Answer

It is unusual, to say the least, for a hospital specialist to expect to be paid in cash. Your unwritten suspicions may, I fear, be well founded. I realise that many patients are frightened to make a complaint about a doctor – lest their own treatment programme be adversely affected – but if no one does anything then this sort of practice will continue.

It is utterly disgraceful – and unforgivable – for any patient suspected of having a serious health problem to be told that he or she will have to wait months for essential investigations to be performed. If NHS facilities are inadequate it is up to doctors to force bureaucrats to rectify the situation.

Lost Sense of Smell

Question

Six weeks ago I had a cold that came and went for a month. I had no medication. Since then my sense of smell (previously very acute) has almost completely gone. Could the infection have caused it? Will it come back? Could it be my age? I am 69.

Answer

It's not unusual to lose your sense of smell after a cold or some other viral infection. My bet is that your sense of smell will return. I don't think

it is anything at all to do with your age. Some of our senses do become slightly less effective with age but the speed with which yours disappeared (and, presumably, the absence of any other symptoms) suggests that this isn't an age related problem.

Other possible common causes of a lost sense of smell include nasal polyps, nasal allergies, and the long-term use of decongestant sprays.

Visit your doctor if your sense of smell doesn't return fairly quickly. (You should, of course, also visit if you have any other symptoms at all.) One other thing – a zinc deficiency can lead to a diminished sense of smell. A zinc supplement might, therefore, be helpful. If you take one make sure that you follow the manufacturer's instructions.

Vaccination and autism

Question

My daughter is autistic. She was born ten weeks prematurely and while still in the neonatal unit she was given her first lot of vaccinations by the nurses without our permission. We were advised that she should be given the MMR at 13 months. She went rapidly downhill thereafter. On the video of her first birthday she was bright, responsive, lots of eye contact and nearly walking. She was even saying a few words. By 18 months her language had gone, all eye contact had gone and she didn't even respond to her own name. All she was interested in was rocking a coke bottle backwards and forwards or flicking through the pages of a telephone directory (watching the flicking movement). Our bright little girl had vanished. She has a 'leaky gut' disorder and, like other children with this disorder is intolerant of gluten and casein in milk. What caused it? I think they are gradually coming round to the view that the MMR jab is the culprit.

Answer

I constantly receive heart wrenching letters like yours and each day I get angrier and angrier at the way doctors, drug companies and civil servants ignore the hazards of vaccination. If thousands of healthy, normal children who had all been given an alternative remedy to protect them

in some way subsequently developed serious health problems there is absolutely no doubt in my mind that doctors would have noticed the connection and would be screaming about the link at the top of their voices. The alternative remedy would have been banned and the promoters of it would have been sued and probably imprisoned. But because vaccines are made by the drug industry and consequently favoured by the drug industry owned medical establishment any protest is regarded as little short of revolutionary. When small, healthy children suddenly stop developing and start to deteriorate there has to be a reason. When lots of small, healthy children suddenly stop developing and start to deteriorate there is likely to be a common reason. When lots of small, healthy children suddenly stop developing and start to deteriorate in a way not previously noted then the chances are very high that some outside influence is responsible for the change. When lots of small, healthy children suddenly stop developing and start to deteriorate when given vaccines and it is known that vaccines can cause brain damage and other serious health problems it is logical to assume that there could be a link. The fact that doctors, drug companies and politicians deny even the possibility that such a link might exist is a scandal and a disgrace.

Duplication of Research

Question

I greatly enjoy your newsletter and with each issue I mentally congratulate you on your insight. However, there is one point in VCHL Vol 4 No 12 which seems to be self contradictory. On the one hand you advise against duplication of research but on the other hand you suggest that doctors finding an unusual side effect should be able to search for similar side effects recorded by doctors who have duplicated the observations in other countries. I believe it is a basic tenet of science that research must be duplicated in order to confirm or rebut the findings of the original researcher. This guards against several pitfalls.

Pitfall 1: Cheating

As we descend into a phase of civilisation when the motivation is more frequently self aggrandizement than honest achievement, there is a tempta-

tion to make spurious research claims that boost the ego. The only way such cheating can be detected is by duplicating the investigation to see whether the same results emerge. Confirmation or rebuttal are not possible without duplication.

Pitfall 2: Chance Probabilities

Results are often a matter of probabilities rather than certainties. If the number of cases investigated is too small one investigation, conducted honestly, may give a chance result which is not sustained when a larger number is researched. Some of my own work illustrates this. Many years ago I thought I had established a relationship between earthquake frequency and variations in earth tides created by phases of the moon. I had studied only two years, which happened to support this conclusion. As I added more years the effect over a longer period disappeared.

Your interesting results on disorders relating to signs of the zodiac is a probability study, as not all patients in the same sign have the same illnesses. It would be nice to know how many patients were in each sign and how many of them had the illnesses of the majority there. This information would allow duplication of your research to see which probabilities are strengthened and which are weakened. Without this we shall not know whether you have started something really significant.

Pitfall 3: Slight Methodological Differences

If a duplication does not exactly repeat the method of study, different results may ensue. If these are traced to their cause, they may usefully deepen our understanding of what is truly involved. This is another way in which duplication can add something constructive.

Years ago Lord Rothschild argued against duplication of research in universities, and it was after that that cheating began to surface. The first student we caught out in passing off someone else's work as her own was denied a degree. The second one used one of my reports...and it was sheer chance that this was discovered. The lecturer found it so good that he phoned me to say how my work was taking root – but during the course of the conversation we became suspicious, and checked a number of passages which agreed word for word. By this time standards of integrity had fallen. The degree was not denied

but simply deferred until an original dissertation had been written. Lord Rothschild has a lot to answer for.

So please, don't discourage duplication of research.

Answer

Sincere apologies. My fault for not explaining myself properly. I certainly didn't mean to suggest that research work shouldn't be checked, double checked and then checked again. What I was suggesting was that repetitive research which is done years after something has been proven beyond doubt is a waste of money. And this happens often. It is by no means unusual for researchers to obtain a massive amount of public money to investigate a theory which has already been proven or disproven.

High Fat Diets and Pin Hole Spectacles

Question

First, I have read many articles exhorting me to eat more fibre and less fat. Now I learn that I should eat more fat to the near exclusion of carbohydrates. How confusing – what do you think?

Second, some time ago I was persuaded to buy some spectacles – black plastic lenses with dozens of pin holes – to help my eyesight. Have you any views on this please?

Answer

I wholeheartedly, unreservedly, unequivocally and without reservation condemn high fat diets. I think they are potty and dangerous.

And although I do try to keep an open mind about every aspect of medicine I haven't been able to convince myself that pin hole spectacles do any good at all. Nor have I been able to find any research showing that they do any good. (I did, however, write about exercises for the eyes in my book *Bodypower*).

Incidentally, readers may be amused to know that when I admitted on a radio programme that I try to keep an open mind about everything an alleged expert on something or other snapped back: 'An open mind is an empty mind.' Frightening.

Emphysema

Question

After visiting the doctor with a chesty cough I had an X ray. I was diagnosed as having emphysema. I am not overweight and I don't smoke. I follow a low fat diet and eat plenty of health food. I am active and feel fit. My work does mean that I am exposed to dust. What is emphysema. What can be done to slow it down or stop it?

Answer

Emphysema is a chronic (i.e. long term) lung condition in which the fibres which help open and close the alveoli – the air holding parts of the lung – lose elasticity because the alveoli have been overstretched. The main symptom is usually a steadily increasing shortness of breath but other symptoms include wheezing and coughing and a susceptibility to lung infections. The problem usually starts after the age of 55. The main causes are long term exposure to cigarette smoke or some other air pollutant. So, I fear that the dust to which you say you are exposed could have been a contributory factor. Emphysema is incurable but the symptoms can be controlled and it is possible to stop the condition getting worse. My immediate advice is that you should consider changing jobs – or, at the very least, wearing a mask which filters pollutants out of the air. If you have few or no symptoms at the moment then this rather suggests to me that your emphysema has been diagnosed very early – before too much damage has been done. Your doctor should be able to give you some breathing exercises which might help and he may also want to find out if you have any allergies which might aggravate your emphysema. But, in my view, the key is to try to find a job which does not involve you in breathing in polluted air.

Mobile telephones

Question

Why don't mobile telephone manufacturers put the aerial at the bottom of the phone instead of at the top? That way the aerial wouldn't be so close to the brain.

Answer

Simple but brilliant. Why are mobile phone manufacturers so stupid?

Imperial Cancer Research Fund

Question

I have contributed to the Imperial Cancer Research Fund for years. I am concerned that you are unhappy with its worth (VCHL Vol 4 No 12) though I have no moral objection to vivisection provided animals are not badly treated while they are alive. What should I do about my payments to ICRF?

Answer

I have received a number of similar questions on this subject. 'Where does all the money collected by cancer charities go to?' asked another VCHL reader. 'I note from VCHL that the incidence of cancer is rising – despite the expenditure of vast amounts of money on cancer research.'

The big cancer charities have, in my view, become institutionalised and my fear is that they may now exist to exist rather than anything else. When so many employees have a vested interest in looking for a cure for cancer I fear that it may eventually be in the interests of the organisation not to find a cure. As a result the research work which is done is largely pretty useless.

Around the world billions of dollars are spent on attempts to find a cure for cancer when we already know what causes 80% of all cancers and could, therefore, easily prevent the vast majority of cancer deaths.

Money is wasted on joint projects with drug companies (looking for profitable forms of chemotherapy) and on promoting absurd drugs such as tamoxifen. In my view far too little effort goes into investigating truly effective, alternative forms of cancer therapy. Indeed, I believe that instead of investigating alternative forms of cancer therapy the big cancer charities have put too much effort into trying to suppress anything which can't make a profit for a drug company or which is likely to upset the medical establishment.

The bottom line is that I feel that giving money to the ICRF (or, indeed, to the Cancer Research Campaign or any similar organisation)

is a waste of money.

Both support animal experiments – which, in addition to being barbaric, are irrelevant, unreliable and pointless.

As a final, slightly relevant aside, it does seem to me to be rather odd that organisations such as these (which perform and campaign in favour of animal experiments) are allowed to be registered as charities, whereas when I tried to register a charity to campaign against animal experiments I was told that it wasn't allowed.

Ritalin 1

Question

I am a headteacher. You may not be aware of another factor which could be encouraging the abuse of Ritalin – that is that parents whose children are being prescribed Ritalin or such drugs for ADHD (Attention Deficit Hyperactivity Disorder) can also be in receipt of thousands of pounds per year in Child Disability Benefit. The transport allowance alone is over £200 per month cash or car. What incentive is there to consider poor parenting or other reasons for a child's difficult behaviour if this 'disability' brings such financial rewards? There is also concern that this drug can be illegally sold as a substitute for cocaine. My health colleagues have coined the phrase 'Professional Parents'.

Answer

I have received many letters about Ritalin. This is clearly a much bigger problem than is generally realised. The key problem is that some of the doctors who prescribe Ritalin (and similar drugs) seem to do so with something approaching religious fervour. These doctors have succeeded in persuading many of the parents of the children for whom they prescribe this wretched drug that ADHD is a 'real' disease and that the drug is essential. ADHD is about as real as the Loch Ness Monster (come to think of it there is a chance that the Loch Ness Monster really does exist so that's a bad analogy) and describing Ritalin as an essential drug is so utterly absurd that I can't think of an analogy.

Ritalin 2

Question

You seem to have hit a nerve with your articles on Ritalin. This was discussed on the Internet recently. The opinion of Americans on the group was that most of the victims of this abuse are boys. Boys in classes with female teachers, which is most of them, are even more likely to be diagnosed as being hyperactive. Some American schools have abolished recess (playtime) because the boys 'run around and shout' and their parents, usually their fathers, refuse to medicate them.

Answer

It is truly alarming to realise that we now live in a world where boys who run around and shout are regarded by educated and presumably reasonably intelligent professional people as needing medication.

Ritalin 3

Question

After my son was diagnosed with ADHD I was given a prescription for Ritalin – to be taken morning and night. After a week he complained of headaches, stomach ache and sickness and I took him to the doctors. She told him to put up with the side effects and that he would get used to them. As the weeks went by he started walking as if in a trance and his cheeks went puffy. At each check up I was told that he was fine. Then he started walking with his head down, then his head started nodding and his eyes rolling to the back of his head. I got in touch with the hospital and was told to carry on with the tablets. At the next consultation the doctor stopped the Ritalin straight away. Then the doctor prescribed Epilim for the spasms. This didn't stop the spasms so the doctor then prescribed Zarontin syrup to go with the Epilim. After an EEG was done we were told that the right side of his brain is damaged. The doctors said that he must have been going to develop epilepsy but that the Ritalin brought it out quicker.

My son was all right before he went on Ritalin. He just had difficulty in concentrating at school and the school called in the educational

psychologist and the doctor. He had learning difficulties but he turned into a zombie.

I am feeling full of guilt for going along with their advice. You have probably saved a lot of children with your comments. Keep up the good work.

Answer

You should not feel guilty for doing what the experts told you to do. In our complex, high tech society we are all of us constantly at the mercy of the experts. The lesson from this sad story (and the older I get the more I learn that it is crucial to follow this piece of advice) is that one should never hand one's life over to the experts. For a variety of reasons the days when one could trust an expert are long gone. This goes for accountants, lawyers, car mechanics, investment advisers and others as much as for doctors.

Waste in the NHS

Question

I spent a week in a hospital recently. I was appalled at the amount of waste I saw.

Answer

About twelve years ago I received documentary evidence showing that when the NHS buys supplies it pays more for them than you and I do when shopping at our local supermarket. For example, I obtained computer print-outs showing that when the health service purchases vast quantities of toilet rolls, washing powder, envelopes, pens and other essentials it pays a higher price per item than you and I would pay if we were purchasing these items one at a time. To me this suggested either that the NHS was being run incompetently and wastefully or that something a trifle underhand was going on. After the story I wrote was published Margaret Thatcher, who was Prime Minister at the time, was so horrified that she sent copies of the article to everyone in the Cabinet. NHS bosses immediately instituted an enquiry. But the enquiry wasn't into why hospitals were wasting vast quantities of money (I had estimated that this particular example of wastefulness was costing the NHS over £1,000,000,000 a year) it was into how I had

managed to obtain the information I had used in my story.

Nothing was done about the wastefulness.

Unhappy Reader

Question

I shall not be renewing my subscription to VCHL. I think Vernon Coleman's attack on the Prime Minister was, to say the least, very unwise. I have enjoyed and appreciated the Health Letter when he writes about health.

Answer

The point I have frequently tried to make is that it is simply not possible to separate health (or, more particularly, health care) from politics. The two have always been linked and always will be.

If we are to take responsibility for our health then we must take an interest in the way our world is structured.

Politicians make decisions every day which have far reaching effects on our health – and, perhaps more particularly, on the health of the next generation. I believe that we have a responsibility to ourselves, to our community, to those in other communities and to our descendants to take a close interest in the actions of those who presume to lead us.

As a writer on these topics it is, I believe, my duty to try to find the truth on these topics – and to expose the lies and deceptions of politicians as well as of doctors and drug companies. Indeed, I would go further. I believe that those who prefer not to confront these problems are avoiding their responsibility.

I can give a very specific example of what I mean. In the early 1970s I noticed that large numbers of patients were getting hooked on benzodiazepine tranquillisers and sleeping tablets. I wrote a book offering patients advice on how to deal with this problem – and how to get off their pills. But I also started a campaign to persuade doctors not to prescribe the drugs so recklessly.

When that didn't work I started a campaign (at times quite a tough campaign) to persuade politicians to issue an official warning to doctors. That campaign succeeded – and the politicians responsible for issuing the guidelines on

benzodiazepines publicly acknowledged that the influence of my campaign. ('Dr Vernon Coleman's articles, to which I refer with approval, raised concern about these important matters.' – Edwina Currie, Parliamentary Secretary for Health, House of Commons, 1988, referring to tranquilliser addiction.) As a direct result the incidence of benzodiazepine addiction has now fallen.

I can give numerous other examples of ways in which direct campaigns have made a difference – and directly improved the health of many people. I am inevitably sorry to lose subscribers but campaigning – and criticising politicians is an essential part of campaigning – works.

It would be easier for me to write a Health Letter which simply dealt with the best treatment for piles, varicose veins and bunions and which did not touch on wider, more contentious issues. That sort of publication would, I know, be commercially successful, but I think the big picture is important. I know that we had more letters of protest (and more cancellations) after I wrote, published and gave away the 'VCHL Campaign Special: *How To Protest*' with VCHL Vol 4 No 3 than we have ever had before.

This government is particularly deserving of criticism because of its double dealing, hypocrisy and complete reliance on style rather than substance. A couple of days ago (to give but one more example) a New Labour government spokesman was quoted as saying (in response to a campaign demanding that petrol prices be reduced) that if they brought down petrol prices they would need to sack lots of nurses. This puerile and unsophisticated comment reminds me of the cover of the American magazine *National Lampoon* some years ago. The editor put a picture of an adorable dog on the cover of the magazine and alongside it the caption: 'If you don't buy this magazine we'll shoot this dog.'

Politicians need to be pushed and bullied and harried and lampooned. And if no one pushes, bullies, harries and lampoons then the quality of life – and health – will continue to deteriorate at breakneck speed.

Mobile Phones and High Tension Power Lines

Question

In the June issue of the IEE News, which is a monthly newspaper for members of the Institution of Electrical Engineers, there is a front page report headed 'Still no evidence of harm from low-level EM fields says IEE.' The article applies to high tension lines and to mobile phones. I think that you would find this article of considerable interest in view of your objections to mobile phones and high tension power lines in proximity to human habitation.

Answer

I have looked at the IEE website and the text of an IEE statement on this subject includes this paragraph: 'A few studies have reported biological effects that warrant further examination. These studies would require further investigation and replication before their relevance, if any, to human health could be established.'

I'm afraid I don't see that as particularly reassuring and it certainly isn't conclusive. The

Dr Vernon Coleman's Health Letter

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IEE seems to me to be saying that it isn't possible to say definitely whether or not exposure has any potentially adverse health effects. Which really takes us no further forward.

I believe it is fair to say that there is now scientific evidence to suggest that there may be biological effects occurring at exposures below the official 'safe' guidelines. Naturally, I agree that this does not necessarily mean that these effects lead to disease or injury but neither do I think it is possible to say that exposure to radiation, even at levels below national guidelines, is without potential adverse health effects.

All things considered I am afraid that the bottom line is that I am still not convinced that mobile phones and power lines are safe. I can't prove that they're dangerous. But I don't think anyone can prove they are safe and it does rather seem to me that we need a good deal more research.

Some of the reassurance I have read recently seems to be based on a 'review of the evidence'. The problem with that is that there really isn't much hard evidence yet; far too little research has been done. We desperately need medium and long term epidemiological research though, of course, by then it will probably be too late for many people. Remember how long it took to prove that cigarettes cause cancer?

Meanwhile, I think that caution is still wise. Use mobile phones for short periods only and hold the phone an inch or so away from your head. And try not to live too near to power lines or sub stations.

Update

- ♦ **Justice:** In civil trials where the defendant is accused of discrimination (on, for example, grounds of sex, race, religion, disability, age or gender dysphoria) the prosecution doesn't have to prove anything. It is up to the defendant to prove him or herself innocent. Unless or until he or she can prove himself innocent he will automatically be found guilty.

Does this sound like a nightmare dreamt up

by Kafka? A legal situation exclusive to some bizarre African or Far Eastern dictatorship? It's neither. In fact this is the new law for Europe. More thanks to Tony Blair and other European 'leaders'. Could this explain why state employers are now often quick to settle and pay out huge sums in compensation? Maybe they don't want to draw attention to this bizarre and unjust state of affairs which has pushed aside the presumption of innocence which always used to be the most important cornerstone of justice.

Coming soon...included next month in VCHL!

- ♦ Bloating and wind – causes and solutions
- ♦ Digestive problems – indigestion, constipation, diarrhoea, nausea, emetophobia, irritable bowel syndrome etc.
- ♦ Plus another bumper collection of Questions and Answers

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'The truth is that our race survived ignorance; it is our scientific genius that will do us in.' STEPHEN VIZINCZEY