Death Is Not a Treatment Failure

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By Allen Frances, MD [1]

In your effort to achieve a perfectly healthy body, you wind up hurting your health.

"Medical research is making such astounding progress that soon none of us will be well."
—Aldous Huxley

I recently discussed the importance of dying well and with dignity—at home, at peace, sent off by a loving family; not in an impersonal and hectic hospital environment, among strangers, your failing body tortured by painful procedures and probed by ubiquitous tubes in a futile effort to cheat death. Here, the issue is living well and without unnecessary fear of disease. Mark Cuban provides the perfect example of how excessive health concerns are unhealthy. He is a brilliant Internet, entertainment, and sports entrepreneur worth almost $3 billion (the guy you see in a tee-shirt sitting behind the bench, screaming almost continuously during Dallas Maverick games—he owns the team).

Recently Cuban offered this medical advice to his several million twitter followers.
1. If you can afford to have your blood tested for everything available, do it quarterly so you have a baseline of your own personal health
2. Create your own personal health profile and history. It will help you and create a base of knowledge for your children, their children, etc
3. A big failing of medicine = we wait till we are sick to have our blood tested and compare the results with “comparable demographics”

Cuban is an undeniable business genius. But in my opinion, he could not possibly give worse advice for a healthy and happy life.

Gisle Roksund, MD, a Norwegian general practitioner and former president of The Norwegian College of General Practice, explains why. Dr Roksund writes: “Western medical science has changed life into a premortality condition and death into a failure of treatment. We are all more or less afraid of illness and death. Mankind always has been. Shakespeare describes it beautifully in Hamlet: ‘The undiscover’d country, from whose bourn, no travellers return.’

“Even though our western world is the safest place ever to live and we are living longer than ever before, people have paradoxically never been more afraid of death and disease. It has become a truism that the earlier the medical intervention, the better. We see the same message everywhere: in newspapers, on the Web, from patients’ organizations, from specialists, and health authorities: ‘Do not hesitate, see the doctor for this and that, for every pain, every little swelling, every little rash. Go see your doctor. Whatever you have, however slight and fleeting, might be dangerous and even cancer. Get every possible test. Better safe than sorry.’

“The inevitable changes wrought by aging are as commonplace inside our body as on our skin. Most are just incidental and have no clinical meaning. Best not to notice. But the wondrous technical developments in medicine allow us to find tiny tumors that are impossible to distinguish from quite normal variations in the aging human body. With our aggressive screening programs using radiology and laboratory testing, we are increasingly overdiagnosing normal variations, turning normal aging into disease and treating it with interventions that reduce health, happiness, and longevity. Psychiatrists have extended the range of psychiatric diagnoses to an extent never seen before. Everyday worries and ups and downs have become psychiatric diseases and are interpreted and treated within a medical context, not as existential phenomena that necessarily will occur in everyone’s lives.

“Within somatic medicine, recommended threshold values for risk intervention have declined dramatically in recent decades in a naive attempt to prevent disease. The lowered thresholds of disease definition do not express medical facts, but rather subjective value choices of the experts in each area influenced by intellectual and financial conflicts of interest. The pharmaceutical industry, the device makers, the hospitals, and the medical and surgical specialists all exaggerate the potential benefits of testing and treatment and minimize the harms.
“We have seen a substantial decline in recommended threshold values for hypertension, hypercholesterolemia, blood sugar, osteoporosis, and kidney function. The diagnostic criteria have been deflated for diseases such as myocardial infarction, heart failure, bronchial asthma, and renal failure. The specialists have introduced new ‘diseases,’ such as prehypertension, prediabetes, preheartfailure, osteopenia, and predementia. These conditions affect so many healthy men and women that soon no adult person can avoid being labeled ‘at risk’ and be targeted for medical attention and intervention. As a general practitioner, I constantly meet people who are more concerned about preventing sickness and disease, than really living. Selling false safety is easy. Life is a lot more than a premortality condition. But life is uncertain. And the art of living is learning to live with this uncertainty. It is about living, not just surviving.“

Thanks so much, Dr Roksund. Modern medical care has its role to play in preventing and treating disease, but has been greatly oversold and overbought. The dramatic reduction in smoking has done much more to reduce cancer deaths than all cancer research and treatment combined. And too much medicine is bad for your health. Medical errors have become one of our leading causes of death.

The best doctors often do nothing except explain to the patient that pervasive screening, constant testing, and aggressive treatment are a prescription for disaster. “First Do No Harm.” When you look hard and long enough for an abnormal lab test value, eventually you will find it—too often a meaningless false-positive outlier that left alone would have no impact on your life. The unnecessary testing and treatments triggered by incidental findings carry substantial harms and risks.

In your effort to achieve a perfectly healthy body, you wind up hurting your health. Living well and dying well are connected. Life is less than full when lived under the fearful shadow of disease. And dying well is impossible for people who fear death so much they fail to prepare for it.

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