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### **Natural (or Empirical) Medicine and Conventional (or Mainstream) Medicine.**

There has over the last few years been a dedicated strategy by individuals and groups opposed to natural medicine to raise questions concerning the validity of research conducted to identify efficacy of natural therapies and in part this has been undertaken by applying the same rules of engagement for those required or favoured by pharmaceutical objectives.

Clinical decisions should, as far as possible and I feel we would all agree, be evidence based and so runs the current clinical dogma.<sup>1</sup> To confirm that evidence is being rightly placed we are urged to lump all the relevant randomised controlled trials into one giant meta-analysis and come out with a combined odds ratio for all decisions.

Yet we, as do all practitioners, deal with individuals in all their complexity and magnificence. This means as Sir Michael Rawlins, chair of NICE says - follow the NICE guidelines for each condition a patient presents with – there a very few that have only one! – and they will end up in more of a mess.

"Hierarchies attempt to replace judgement with an oversimplistic, pseudo-quantative, assessment of the quality of the available evidence."<sup>2</sup>

But what proportion of current commonly used 'medical treatments', against which we are commonly compared are supported by good evidence and how big are the knowledge gaps in westernised medicine? According to the now defunct Clinical Evidence web site run by the BMJ of around 2,500 treatment covered just:

13% were rated as beneficial,

23% likely to be beneficial,

8% as a trade off between benefit and harm,

4% ineffective or harmful

and a whopping 46% as having unknown effectiveness.

This as they say suggests that the research community has a large task ahead and that most decisions about treatments still rest on the individual judgments of clinicians and patients.

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<sup>1</sup> Keus F, Wetterslev J, Gluud C, van Laarhoven CJ. Evidence at a glance: error matrix approach for overviewing available evidence. BMC Med Res Methodol. 2010 Oct 1;10:90. [View Paper](#)

<sup>2</sup> Harevian Oration, Royal College of Physicians 2008 [View Summary](#)

This number roughly equates to the number quoted by Dr Alan Roses world wide Vice President of genetics at GlaxoSmithKline when he stated in 2003 that more than 90% of drugs only work in 30-50% of patients identifying the reality of efficacy. <sup>3</sup>

We on our side of this apparent fence should consider that we only have to do better than 50% in 90% of our treatments and we would match the results derived from billions of pounds of investment over many decades of development to be regarded as leaders in medicine.

meta-analysis is a mechanism whereby all data from available studies are combined, regardless of the relative quality of the data. This is used to gain maximum statistical information from studies that may have small sample sizes or results of marginal significance. They are merged and analysed for similar or absent correlations. These are often used to bludgeon natural therapies as being ineffective.

This relatively new method of rehashing other people work and reinterpreting the results means that someone could get published without doing any real investigative work and if it features a popular dietary supplement he would most likely get some media exposure as well. An effect a bit like the bankers must have felt when they first discovered how to make money using other peoples!

Data manipulation like this is flawed, you cannot make bad data good by mixing it together – in fact the opposite is mostly what happens, in part because there is no unifying weighting system to the data weak studies are pooled with strong and regarded as the same in terms of data value.

The genetic and environmental backgrounds of the individuals being evaluated make a huge difference. These are not simply systematic errors to be averaged out, they are essential components of the way nutrients, or natural agents react with the body. The result may be that they average out the very differences that determine effect such as in the case of the antioxidant meta analysis that suggests increased risk of death.

Are Skeptics The New Manicheans?

Many commentators on this evidence are prone to falling into the dogma first alliterated by the prophet Mani and later proselytised by followers of his religious theology called Manichean's in which life and the body for simplicity, are defined by good and bad (evil). This opposing and highly frictional dichotomy was defined as dualism. Some of this theological dogma is still found today in skeptical analysis, especially in their fundamentalist forms. This deterministic approach, seeing everything in black and white rather than shades of grey, is known by philosophers as the Manichean fallacy.

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<sup>3</sup> The Drugs don't work Life Science Journal 2004