Fallacy of Diagnosis; or The Power of an Un-Diagnosis January 2010



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The word "diagnosis" is derived from two roots, "dia" and "gnosis". "Dia" means "through"; "gnosis" means "knowledge or recognition". So, diagnosis means "through knowledge" or "through recognition", by which we explain what is going on in our bodies. In western medicine, diagnosis determines treatment.

When we seek a diagnosis we also seek a "pro-gnosis", which is similar in origin except the "pro" means "in advance" or "to proclaim". Prognosis is a prediction of what's to come based on our knowledge

The strength or weakness of a diagnosis and prognosis are buried in these definitions as will be discussed below.

People usually seek out medical attention for one of two reasons: 1) relief of pain and suffering, and 2) to determine a diagnosis and prognosis. A diagnosis is not needed to relieve pain and suffering--narcotics will relieve (mask) pain whether it's from a minor sprained muscle, an acute infection (such as appendicitis), or advanced cancer. However, without diagnosis, treatment is limited, and we cannot get a prognosis, which predicts the future--whether will we get better or worse, and how long that will take.

The Strengths of Diagnostic Categories

To optimize public health, society needs diagnostic coding in order to watch for trends such as to the obesity epidemic and the appearance of Swine Flu.

Diagnosis is also important for the advancement of medical knowledge. By putting constellations of symptoms (subjective experience) and signs (objective observations) into diseases, such as "diabetes", we begin to collect and share experience that improves treatment and prognosis. As we get better at diagnostic processes, we then qualify and sub-divide diseases into sub-types, such as diabetes type I and II, each with a different treatment and prognosis.

Historically, medicine has made a distinction between a "disease" and "syndrome". In a <u>disease</u>, we allegedly know the cause; while a <u>syndrome</u> is a collection of symptoms and signs without a known cause. For example, pneumonia is caused by bacteria; diabetes by a lack of insulin; while Fibromyalgia syndrome has no known cause.

When we know the cause of a disease, we can theoretically find a cure. In pneumonia, antibiotics are the cure. In diabetes, insulin is the cure. The discovery of antibiotics and insulin in the early 1900's was so powerful, that it enabled the pharmaceutical industry to gain hold of the consciousness of America as the "magic bullet" solution to illness and aging, a hope that continues today and which is bankrupting our society out of health and money.

While the discovery of antibiotics and insulin were indeed important landmarks, there are inherent fallacies in the conclusions and industries that were built upon these discoveries. The "one-disease, one-cause, one-cure" model of illness works fairly well only for a handful of diseases. For the majority of today's problems that bring people to their doctors, plague adults and children, and cost of over one tenth of our gross national product, not including the cost of lost productivity and quality of life and greed of various industries, it is this model that is in many ways the

root cause of the current failure of the health care system.

The Limitations of Diagnosis

To understand the limitations inherent in a diagnosis, let's look in greater detail at the prototype of modern medicine, pneumonia. Is pneumonia truly "caused" by bacteria? Well, bacteria are present all the time, on our skin, in our mouths and other crevices; we carry three pounds of bacteria (and yeast) in our small and large intestines. Bacteria and other organisms are present on all surfaces, all the time. So, if we get pneumonia because of bacteria, then shouldn't we all have pneumonia all the time?

This question seems preposterous, because we know that our immune system protects us! Ah-hah, so the immune system enters the equation. Well, why did the immune system falter? Poor sleep, stress, genetics, aging, toxicity, nutritional deficiency, other illnesses, medications, hormonal imbalance, etc. So, when looking closer, even a simple disease such as pneumonia is "caused" not by a single agent, but by a web of factors that all add up to a perfect storm of immune system dysfunction enabling bacterial invasion.

Yes, antibiotics can "cure" pneumonia by weakening the bacteria and giving the immune system a chance to catch up. However, in many cases, such as with ear infections in kids, bacteria are not the cause, and using antibiotics only manage to kill off good bacteria, changing the ecology of our bodies and our environment, allowing more dangerous bacteria (and yeast) to establish themselves and set the stage for a future more severe attack.

In adult onset diabetes, the web is even more complex. It involves genetics, aging, gender, sleep, exercise, stress, hormonal systems, and most importantly, diet. And considering diet, it is not as simple as "carbs", but the balance of nutrients¹.

Furthermore, no two people with the same diagnosis or disease have the exact same pattern. Some diabetics respond to treatment A, while others need treatment B, or C, or D. At best, a diagnosis is a general or average pattern which exhibits extraordinary variability when it comes to the individual. Likewise, prognosis is quite variable.

Diagnostic Tests: Structure versus Function

These days, many patients request MRI's and other high-tech tests, hoping that such tests will objectify their vague symptoms by providing a diagnosis. In fact, diagnostic tests have become such an important part of our medical culture, that (in addition to the destructive effect of HMO's) interaction with a physician--history, physical and counseling--have become a minor part of the process ove evaluation and treatment. The problem with many of these tests is that they are "structural", only showing changes in the physical state of the body. They are do not show how the body is "functioning"--how the organs and biochemistry of the body are working. The diagnosis that they provide is therefore delayed and reflects the later stages of a process that has been in place for years, sometimes decades.

Western diagnosis of a chronic condition often is not

really very helpful, because treatment is not aimed at a root cause, and prognosis is usually un-predictable.

Symptoms

The earliest signs of dysfunction, the earliest knowing, is when the body-mind sends warning signals to consciousness that something is wrong. These signals are called symptoms. The pain, anxiety, mental fog, and other symptoms are not produced to cause suffering--they are a gift from evolution--a warning email from the body-mind that something is wrong. We don't want to mask our symptoms with "pain killers"--we want to understand these messages—to know what they mean. However, after a patient goes to several doctors complaining of a symptom, and the conventional tests don't show anything, the patient feels invalidated or stupid and the doctor tells them "there's nothing wrong", "to live with it", or to try a free sample of anti-anxiety or anti-depressant drug.

The powerful inner message that symptoms could and should be corrected is what usually drives a patient to a holistic practitioner.

Ancient Methods Prove Superior for Chronic Ailments

The ancient Chinese and Indian (Ayurvedic) Medicine paradigms recognize that illness proceeds from vague symptoms, to functional problems, to biochemical changes (such as high blood sugar in diabetes) and lastly to structural changes. Waiting for a symptom to progress to a clogged artery or detectible tumor is not what we want. As the Chinese saying goes "one should not build weapons after the war has started or dig wells after the drought has begun". The diagnoses in these ancient paradigms are much more individualistic, are functional, and require a multi-dimensional approach to healing.

The current major diseases of our society, which we call "chronic" (a euphemism for "no solution") including arthritis, pain, heart disease, cholesterol, hypertension, obesity, cancer, autism, ADD, GERD, depression/ anxiety and sleep disorder have even more complex webs. The sad truth is that we begin to spin these webs in early childhood². The lucky truth is that all these chronic conditions are preventable and reversible, in many cases to a large degree. While conventional medicine, at best, can only "manage" these diseases, a euphemism for "masking" (or in my words "nuking") the symptoms, using a web-based approach, holistic medicine can help unwind the body, mind and spirit from such conditions and improve treatment and prognosis.

Is There Security in Not Knowing, or Un-Diagnosis?

Eastern philosophy teaches us about the limitations of cognition or thinking. The mind, while powerful, like a computer, is limited by the quirks of it's hardware and software. Human spirit, intuition and emotion, while immeasurable and elusive, are powerful, and provide the underpinning for our function and structure. The hard part of accepting this different paradigm is the "not-knowing"-accepting the fact that we can't muscle our way through this process with our brains--that we need to accept the totality of our experience. Yes, we want information; but all the information may not be interpretable by thought--that vague ache which is associated with a memory or body position

has meaning; but the exact meaning may not be articulated with words. Refusing to be put in a diagnostic prison, allowing the anxiety of not knowing, listening to the bodymind, is a different but important paradigm for healing of chronic illness. Every sensation, intuition, memory, flash of insight, worsening of symptoms, moment of confusion, coincidence and synchronistic event is important in finding a root cause and tweaking treatment.

A yoga practice is often critical for this process, as it provides a survey of the body-mind, and through the process, postures and breath provides new and important information. Working with a holistic practitioner who can help interpret and balance the subjective and objective can enhance the efficiency and enjoyment of this life-long process of achieving optimal health.

IMPORTANT NOTE: This educational material may not be used to make decisions about medical care without the help of an experienced practitioner.

Footnotes (see reading list for more information)

- ¹ Joel Furhman MD, one of the most successful doctors in healthfully "reversing" diabetes, obesity and heart disease explains the importance of nutrient-to-calorie ratio in his book "Eat to Live" below.
- ² See Fuhrman's "Disease-Proof Your Child", below.

For More Information (Books followed by ISBN #'s)

- O See Dr. Cheikin's website, www.cheikin.com, for related articles on: Listening To Your Pain, CSI of Health Care, and others as well as other topics and holistic health information.
- O Dr. Cheikin offers workshops in several holistic health topics for adults and children. Please call for more information.
- O Ballentine, Rudolph: <u>Radical Healing: Integrating the World's Greatest Therapeutic Traditions...</u> Three Rivers, 2000. 0609-804-847
- O Sivananda Center: <u>The Sivananda Companion to Yoga</u>. New York: Simon & Schuster, 1983. ISBN: 0684-87000-2.
- O Pitchford, Paul: <u>Healing with Whole Food: Asian Traditions and Modern Nutrition</u>, 3rd Ed. North Atlantic, 2002. 1556-434-308.
- O Fuhrman MD, Joel: Eat to Live. Little Brown 2003. 0316-829-445.
- O Fuhrman MD, Joel: <u>Disease-Proof Your Child: Feeding Kids Right</u>. St Martins, 2006. ISBN 0312-338-082
- O Peck, M. Scott: <u>Road Less Traveled</u>. New York: Touchstone, 1978 (1997). 0684-847-248.

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