#### **OPEN ACCESS**

Volume: 11

Special Issue: 1

Month: June

Year: 2024

P-ISSN: 2321-788X

E-ISSN: 2582-0397

Received: 25.05.2024

Accepted: 21.06.2024

Published: 28.06.2024

Citation:

Ahmad, S. (2024). Need for a Holistic Approach to Health Care. *Shanlax International Journal of Arts, Science and Humanities,* 11(S1), 92–96.

#### DOI:

https://doi.org/10.34293/ sijash.v11S1-June.7786



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# Need for a Holistic Approach to Health Care

Shahbaz Ahmad

IFS Retd. Madhya Pradesh, India

#### Abstract

Due to the complacency of the practitioners of herbal and natural health traditions, the commercial interests found a lucrative opportunity in the drug business. Neglecting the principle of cure, emphasizing just one or two aspects of the therapeutic property of drugs and excelling in chemical standardization, the suppressive approach to medication has been able to overwhelm the other branches of a holistic medical system. The need of the hour is a health care system where there is ample scope for traditional herbal and natural health care supported by professional holistic health centres.

Keywords: Health Care, Medication, Herbal Medicine, Drugs, AIDS, Holistic Medical System.

#### **The Herbal Medicine**

Human beings have relied on herbs ever since they came into existence. Herbs are a natural remedy for all human aliments. In India while there are about 2000 medicinal plants mentioned in codified ancient texts, about 8000 plants are in folk uses for traditional health care. Every single plant has a number of usages which can be utilized according to the ailments and the circumstances. Every herb has two types of usage—one which is primary i.e., that which is intrinsic to the herb, and the other which it can fulfill only by special adaptation or preparation (Tierra, 1999). With the advent of time, the specialization in chemistry and physics and the coming of industrialization and urbanization, the innate importance of herbs has gradually been forgotten. The focus has shifted to the chemical analysis of drugs and its property is attributed to one or two of the many chemical compounds, which it contains. The holistic property of herbs has been overshadowed. The language of Nature has been replaced by the language of Chemistry. With this approach, a few of the properties of an herb may be utilized efficiently. But the great loss is that the herbs are not being recognized for the myriad of health ailments, which they are able to take care of. Specialization coupled with commercialization has reduced the importance of herbal medicine.

## The Onslaught of Commercialized Technology

About a century back, the health care system consisted of herbalism including the codified systems, homeopathic medicine and lay midwifery. A combination of all these was capable of tackling the common health ailments without any excessive financial strain on the public. But the suppressive therapy i.e. allopathy was able to devalue the existing health care systems and establish its own monopoly. The reason behind it was commercial. The telepathically-supported American Medical Association was in the forefront of such a move. In 1907, Andrew Carnegie and John D. Rockfeller commissioned a man named Flexnor to investigate hospitals and schools in order to advise them on investments in American medicine. Flexnor reported that the *'heroic doctor'* i.e., those who used surgery freely, would best present the development of industrial technology and would provide the greatest profit to his sponsors. Hence on, with big financial support, the allopathic medicine started flourishing, suppressing and devaluing the other approaches to health care. Herbalism was so denigrated that medical doctors of the 1930s were ashamed to admit their knowledge and use of traditional herbal remedies. Big chemical drug companies stood as opponents of herbalism. They found how lucrative the exclusive patent rights on synthetic drugs were. The herbalists on the other hand employed substances that could be found and used by anyone. Ever since then herbalism has been fighting a losing battle. The principles and ethics of health care have not been able to stand the commercial onslaught.

#### The Suppression of Diseases

In herbalism, the human body is treated as a living unit. All effort is to root out the disease completely. In the 'heroic' allopathic treatment, the aim is to drive off the symptoms quickly, thus suppressing the disease further into the body. Such suppressive attempts have always played havoc with the human health. There are hundreds of examples, where the suppressing of itch or skin diseases have either been fatal or resulted into some other severe health ailment (*Hahnemann*, *1986*). The advent of antibiotics and other suppressive drugs have produced dreaded diseases like AIDS. Various studies have pointed out that the cause of the AIDS epidemic is the ongoing epidemic of syphilis, often masked by antibiotic abuse. Suppressed and smoldering underground for years, it has slowly burned out the immune system of a large proportion of those who have been treated for syphilis with antibiotic--knowingly or unknowingly--since 1945. The continuing assault on the immune system from the drugs used in modern medicine has helped prepare the ground for the modern scourge of AIDS (*Coulter*, *1987*).

The human immune system cannot be suppressed and undermined indefinitely without a price being paid. AIDS is the latest scourge in the line. Yet, in spite of clear indications, the attack on the human system goes on in the name of modern medicine. Every act of suppression is hailed as a cure. The suppression manifests itself in a more intensive form to be suppressed again. This assault on the human body goes on in the garb of scientific treatment (See Box-1).

[The following appeared under the above heading in the Saturday Times of The Times of India, dated 24 January, 1987]

A young man developed a sore throat. He went to his physician who prescribed penicillin for the inflammation. The Sore throat promptly disappeared. Three days later, however, he developed itching and hives all over his body. A physician correctly diagnosed a Penicillin reaction and prescribed Anti-histamines. The hives went away. The antihistamines caused the patient to be drowsy so that he cut his hand while at work. He went to his company's nurse who put some antibacterial salve on the injury. The salve contained penicillin and caused the hives to return. Recognizing a possible serious anaphylactic reaction for the second time, his physician then prescribed Controorstroids (Cortisone). The hives again disappeared Unfortunated, the patient developed abdominal pains

Corticosteroids (Cortisone). The hives again disappeared. Unfortunately, the patient developed abdominal pains and noticed blood in his stools. The correct diagnosis was then made; a bleeding peptic ulcer brought on by the Cortisone. The patient failed to respond to standard measures to correct the hemorrhage so the next course of action indicated was a partial gastrectomy. The surgery was successful. The stomach pains diminished and the bleeding stopped.

The patient lost so much blood due to heamonhaging and the stomach surgery that a transfusion was indicated. He was administered two pints of blood and promptly contracted hepatitis as a result of the transfusion. Being young and vital, he recovered from the hepatitis. However, at the point of insertion of the transfusion needle, a painful red swelling appeared, indicating infection. Having had previous bad experience with Penicillin, the drug of choice for this infection became Tetracycline. The infection promptly subsided. Disruption of the intestinal bacteria by the Tetracycline caused painful abdominal spasms and severe diarrhea.

Disruption of the intestinal bacteria by the Tetracycline caused painful abdominal spasms and severe diarrhea. The patient was then administered an anti-spasmodic type drug and the diarrhea and spasms subsided. Unfortunately, this drug was in the belladonna or muscle-relaxant group of drugs which relaxed the smooth muscles all over the body. From this action on the muscles of the iris of the eyes, it impaired the patient's vision. He drove his car into a tree and was killed instantly. **This is a true story**.

(From the Nassau Country Nursing Society Magazine)

Box-1 WE DID OUR BEST?

#### The Woes of the Common Person

As if this is not enough, drug companies with profit as the sole motive continue producing synthetic drugs, which they find suitable and for which marketing is easy. Whether the production of a drug is essential or not, is nobody's concern. According to Health Action International (HAI)-an informal network of consumer health, development and public group located in more than 60 countries, four out of every five anti-diarrheal products in the market are useless. Four out of five cough and cold products contain ineffective ingredients, and half of these may actually be harmful. A fifth of all analgesics are potentially harmful and four out of five vitamins commonly prescribed should not be recommended at all. A study by 20 of the largest European pharmaceutical companies in six different regions of the world showed that only 16 percent of the 3021 cited drugs were essential (*IE*, *1993*). To add to the woes of the common person it has now been found that about 30% of these are fake.

As regards health care, the common person finds himself perplexed. The medical system is dominated by the business industry, which propagates the suppressive allopathic system with all its adverse and undesirable effects. But this system is often suitable to tackle the emergencies and life threatening situations. Hence, willingly or unwillingly one is forced to be at its mercy. If one turns to other systems of therapy, often called the Alternative therapies, he finds that the people there are demoralized and are not well equipped to tackle the emergencies. Moreover, the practitioners of the so-called alternative therapies often suffer from a feeling of inferiority and are trying to tow the allopathic mode of treatment. The common person often finds himself shuttling between the various therapies. Severed from the herbal base, he has no option but to submit himself to expensive modes of treatment whatever its effect is on the human body. Earlier the concept of health incorporated a good environment, healthy life style and herbal or natural treatments of health ailments. This concept has now been replaced by a chain of allopathic hospitals, a host of synthetic drugs, health insurance and submission to various medical tests and checkups. The 'heroic' allopathic prescribers need a variety of tests and check-ups before deciding upon a prescription. They prescribe drugs, which are often developed and promoted by the same agencies which have manufactured them. Even for basic health care you have to participate in this commercial venture. If you cannot, then you are left to yourself. Dr. B.M Hedge, having a full panoply of UK medical degrees and a visiting Professor of Cardiology of the Middlesex Hospital Medical School of London, opines that even today more than 80 percent of the world's population has nothing to do with so-called modern medicine. High-tech medicine has become prohibitively expensive and hence failed to guarantee health. He believes that modern medicine should not provoke fear and anxiety, as it does today.

Regarding health care, the common person finds himself insecure, unsure and helpless. A recent example is the fear of Coronavirus. The ruling medical system is in the hands of big commercial houses, devoid of the healing of Nature and the essentials of Nurture.

## The Nature of Drugs and the Mode of Treatment

The curative power of medicines is solely due to the power they possess of altering man's state of health. Every medicine deranges more or less the vital force, and causes a certain alteration in the health of the individual for a longer or a shorter period. This is called primary action. To its action our vital force endeavors to oppose with its own energy which is known as secondary action. Examples of this dual action of medicines are evident in everyday life. For example, after the profound stupefied sleep caused by opium (*primary action*) the following night will be all the more sleepless (*secondary action*). After the constipation produced by opium (*primary action*), diarrhea ensures (*secondary action*), and after purgation with medicines that irritate the bowels (*primary action*) constipation of several days duration ensures (*secondary action*) (*Hahnemann, 1984*). A Health care system cannot be effective until this dual therapeutic action of drugs is recognized. The primary action of the drug is due to its physiological dose, which may be essential to be employed to counter some emergency or life threatening situations. But the curative power lies in the secondary action, and this action of the vital force is essential to cure the body of dynamic diseases. The plants and animal derivatives may also have preventive, nutritive or catalytic uses. A judicious health care system should provide the intelligent use of the various properties of drugs as and when required. For example take the case of Andrographispaniculata (Kalmegh). Its primary action is in its being abortifacient, antipyretic, expectorant, hypoglycemic, laxative etc. This property of Kalmegh may be utilized for acute or emergency situations. But Kalmegh will be able to cure a fever by the secondary action of vital force if it has the following prominent modalities—¬

Double type of fever which comes at 11 a.m. and again at 7-8 p.m. There is burning sensation all over the body, which is relieved by cold air and application of cold water. The patient wants to keep quite during the fever (Ghosh, 1952).

Kalmegh also acts as a preventive for malaria and as a tonic for general debility and in convalescence after fever.

Thus, wisdom lies in utilizing the full range of virtues of Kalmegh or any other drug rather than using it for some condition which has been classified very broadly for convenience. In Ayurveda also there is provision for using medicines, specific diet and activity routine in two ways. In one approach, these three measures antagonize the disease by counter acting the etiological factors and various manifestations of the disease (Vipreeta*treatments*). In the second approach, the same three measures are targeted to exert effects similar to the etiological factors and manifestations of the disease process (*Vipreetarthkari treatments*). In fact Ayurveda encompasses the allopathic approach for acute and emergency conditions, the homeopathic approach for curing the disease, and the preventive & rejuvenative strategies as well. Ayurveda could have faced the challenge of the commercial onslaught if it could have been presented as an all-encompassing health care approach. But the irony is that the followers of Ayurveda are content with it being classified as an Alternative Therapy and are towing the allopathic line of chemical analysis of drugs, though still far behind in this field also.

The common person doesn't have any place to go where he can be treated with a curative therapy, where his acute and emergency conditions may be tackled efficiently, and where he could be advised for a healthy diet and life style--all in one place. Suppressive allopathic approach, which should have been a rarity only for acute and life threatening situations, has become the norm, just because it is commercially very lucrative. The curative approach on the other hand has been classified as another Alternative Therapy. The universal law of cure has long ago been enunciated by Samuel Hahnemann¬—

# "A drug having power to produce certain type of sufferings in a healthy person, is in small doses, able to cure a disease having similar symptoms."

(Hahnemann, 1984)

The same principle has been repeatedly mentioned long ago in Atharvaveda-¬

(To achieve the best, overcome the most similar)

(Atharvaveda: 2:3:11)

## A Pragmatic Approach to Health Care

A pragmatic approach to health care will require the acceptance of the vast resourcefulness of natural drugs, especially the herbal ones. With a holistic approach the allopathic component of therapy will have to be confined to its proper place. With emphasis on curative therapy, preventive

and rejuvenative strategies will have to be in the forefront of social health care. The power of drugs in its natural form will have to be explored instead of paying too much attention to its chemical constituents. Such an effort will trigger vehement opposition from the big drug companies who are flourishing at the cost of the health of the people. For a holistic health care system, the governments will have to take a strong conceptual stand against the vested interests. Expert advice may be availed from persons who have selflessly devoted themselves to raise awareness among the people and providing them with affordable health care.

A pragmatic health care system will require the revival of herbalism. The tradition of kitchen health gardens will have to be re-emphasized. There will have to be a network of herbal gardens with health huts especially in rural areas, where knowledgeable *vaidyas* and *hakims* will be providing their services. The rural health care system will have to be completely freed of the clutches of commercial medicines and from too much of standardization. Simplicity and herbal health care will have to be coupled with sanitation and a natural healthy living style.

To cater to the professional medical needs, for a group of villages and in semi-urban and urban areas, there will have to be holistic health centers. Here a common person may get appropriate medical services at a reasonable cost. The inimical and competitive divisions between the various drug therapies need to go. In principle there should be only one professional medical degree for whole of the country (See Box-2).

#### Box-2 A Single Medical Degree

In India we have a number of medical degrees e.g. MBBS (Bachelor of Medicine and Bachelor of Surgery), BHMS (Bachelor of Homoeopathic Medicine and Surgery), BAMS (Bachelor of Ayurvedic Medicine and Surgery), BUMS (Bachelor of Unani Medicine and Surgery) etc. The diagnostic and therapeutic components of all the courses are different. Besides MBBS, in no other system there is practical exposure to surgery. In fact only the MBBS doctors can become a surgeon.

The most aspired degree in medicine is the MBBS. For doing MBBS in a private college, an expenditure of about Rs. 1 crore (Rs. 10 million) is required. Such a huge amount can be spent only by extra rich parents. The irony is that this expenditure is often like an investment. An MBBS, whose parents have spent such a huge amount of money on him or her, will certainly try to earn as much as possible. It would be futile to expect an adherence to principles or a sense of service. But it is not their fault. It is a system fault which needs to be rectified.

For proper health care there should be only one basic medical degree in a country. The curriculum of such a degree may consist of all the common subjects of different courses at present. In diagnostics and therapeutics the students should be exposed to the principles of the different therapies. The student may have the option to specialize in one of them. Armed with knowledge of the different therapies, a medical graduate will be able to treat the patient judiciously with the best approach suited to the patient. Moreover, the cost of acquiring a degree in holistic medicine may also come down substantially.

A Holistic Health Care approach will mean more of kitchen gardens, herbal gardens, adequately equipped health huts supported by professional holistic health centers where affordable health care is available. Steps may be taken so that the R&D in drug development may primarily remain with a government supervised non-profit making organization. Business may be allowed in the production of drugs, which are approved by an expert body not having any interest in the manufacture of drugs.

#### References

- 1. Coulter, Harris L.(1987) AIDS and Syphilis-The Hidden Link; B. Jain Publishers, New Delhi
- 2. Ghosh, Dr. S.C. (1952) Drugs of Hindoosthan; Hahnemann Publishing Co., Calcutta.
- 3. Hahnemann, Samuel (1984) Organon of Medicine; M. Bhattacharya & Co. (P) Ltd., Calcutta.
- 4. Hahnemann, Samuel (1986) The Chronic Diseases; B. Jain Publishers, New Delhi.
- 5. IE (1983) Pop pills now, regret later; Indian Express, 15th October, 1983.
- 6. Tierra, Michael (1999) Planetary Herbalogy; Motilal Banarsidas Publishers, New Delhi.