

THE 'DISASTER FILM'... THE POSSIBILITY OF 'AVOIDING IT' ?

The question is far from commonplace and deserves reflection.

Orders under pain of, encouragement under pain of... incentives to, on the pretext of... : the spectre of illness and death must be warded off...

It becomes omnipresent because of that...

There are many - visible or hidden - scenarios which keep everybody fearful of...

As regards the sick subject - or the subject running the risk of being so - they are likely to affect people alerted to the potential or actual risk of...

They question the way of thinking which is based on the latest discoveries, pervades healthcare policy and plays a role in various 'disaster films', certain of which might most probably be avoided, if not prevented.

Legitimately put in place to make up for the risk to the greatest number of people or subjects reactive to sometimes inappropriate treatments, certain of these 'scenarios' have engendered sufficient anxiety for one to question their validity in certain cases.

In a time when the accepted shadow of 'therapeutic unforeseen turns of events' is still present, their inconveniences have sometimes seemed greater than the disorders they have tried to avoid...

The paradox of a period... :

On the one hand, nobody cares about certain inconveniences put under the heading 'side-effects', with sometimes problematic consequences for some ;

On the other hand, everybody 'cries wolf' as soon as a problem arises, sometimes alarming unduly people who are ready to take at face value what is appropriate to some or in certain countries and should therefore be applied to all.

The goal here is not really to make useless and inopportune criticisms...

It is rather to see if a new perspective might not make prevention more effective and offset the too frequent 'surprises' which sap people's confidence and engender legitimate suspicion as regards the suggested treatments.

If it cannot help solve the problem as a whole, there is an element which might facilitate the more enlightened putting in place of the 'precautionary principle'.

Coming from observation whose criteria cannot be called 'conventional', certain visible and accepted data are not explored.

Considered unimportant, they are put aside. And yet the analysis of them might be helpful to avoid a quick generalisation out of conclusions showing their limitations next and therefore permit to put in place more appropriate solutions beforehand.

The goal here is not to refuse what is suggested as regards prevention of health risks, rather to widen its scope and perfect certain facets of it which, if not taken into account, bring about 'disaster films'.

What is at issue here is the fact that certain conclusions are generalised too quickly as well as the refusal to take into account the true value of what is linked to individual reactions and is categorised as 'therapeutic unforeseen turns of events'.

What is appropriate to some is not automatically appropriate to all, and what is appropriate to all is sometimes harmful to some.

What is important is to take this into account before making any statement and, above all else, not to miss any opportunity to mitigate the problem effectively.

To try to understand through observation and *all* usable data will only help progress in this direction to destroy prejudice, false ideas or far-fetched allegations hidden behind apparently acceptable facets.

Seen in a different light, certain 'unforeseen turns of events' are predictable...

Their explorations through the available means might undoubtedly open up other opportunities to know them better : a more appropriate use of molecules or more suitable prevention strategies might be put in place.

The fact that individual reactions, the existence of subjects who are more quickly reactive and in smaller doses¹, the 'toxic' effects² of misused molecules and the sometimes inappropriateness of the prevention measure³ because of a different context are not taken into account is detrimental.

Whatever the 'disaster film', it is eventually partially linked to the disregarding of what is linked to individuality and does not permit total foreseeability concerning the illness and a medicine.

Whether it concerns the subject who is ill or potentially ill or applies to all people, each 'scenario' of this type is based on the same problem : even if it is integrated into the statistics, *in essence, it is not the object of exploration by conventional protocols.*

Trying legitimately to mitigate all potential risks, the preventive aspect sometimes proves problematic :

It is often inadequate : as their existence or true value is not taken into account, individual reactions pose problems.

Also, it can sometimes prove most excessive... : anxiety, panic and sometimes loss of confidence therefore appear...

It is essential to think about what might be improved, if not prevented, to avert too much and sometimes unjustified 'panic'.

The credibility of the measures recommended will depend on it, especially as self-medication encouraged for economic reasons and combined with the use of the most modern means very often facilitates the patient's illusion that they 'know' and sometimes leads them, if not to criticise the treatment, even to suggest one... : 'On the Internet, they say that...'

¹ Those who, in homoeopathic jargon, are called 'responding types'.

² 'Pathogenetic' effects, still in homoeopathic jargon.

³ Appropriate for certain countries, it may not always deserve to be generalised or extended to others for which the risk is less important or whose population does not have the same sorts of weakness or 'responding types' and will not necessarily respond in the same way.

There is an element which prevails in today's way of thinking and which deserves to vary in the light of the facts and what the observation of the real teaches one.

Not to take it into account leads one to be cut off from it and to accord more importance not to living organisms but to the conclusions of figures and test tubes :

Knowledge cannot be confined to the statistics and reproducibility.

Referring to different types of epistemology, certain disciplines, which have a facet closely related to science - psychology, for instance⁴ - have illustrated this : each individual and each problem are unique.

If science obeys general laws, each situation is unique...

Unless it is more in phase with reality, no 'prediction' can be made.

If it is possible to observe reactions which are generally alike, on the other hand it is not possible to disregard the peculiarity of certain of them.

There are different factors. They should be studied, otherwise it will not be possible to mitigate them, and it is not because a phenomenon is not detected or always detectable straight away that it has not occurred or that the organism does not carry a sign of it.

Paradoxes of today, many findings whose rigour is incontestable mention the existence of these specific reactions.

If a general explanation of them is given with a great many doses or blood tests, most of the time, since they apparently cannot - or will not - be integrated into an enlarged conception, their existence is simply mentioned without their contribution being explored.

Merely observed, they are put down to 'therapeutic unforeseen turns of events' or peculiarities.

If they are mentioned, they are not the object of closer observation until⁵...

And yet, if they are not understood, these reactions, which are considered 'individual', are not without inconveniences :

As soon as they are announced, they engender a form of 'general panic'...

If they are linked to the taking of a medicine, they generate widespread alarm :

They bring about - because it is not tolerated by some⁶ - either the withdrawal of a useful product for many, who will no longer benefit from its therapeutic advantages, or its 'blacklisting' by the patients given the suspicion linked with it.

⁴ Which, if it confined itself to this perspective, would still stagnate in the behaviourism of the fifties.

⁵ The director of an important laboratory, who was recently interviewed on television, said 'in good faith' and, after all, rightly, that given the huge number of boxes used, the 'therapeutic unforeseen turns of events' observed in certain patients were limited compared with the benefits.

⁶ Because of a difficulty linked to what might be called, in homoeopathy, a problem of 'responding types' - subjects reacting more quickly and strongly when taking a medicine, with more rapid appearance of toxic phenomena, notably during 'pathogénésies' - or because of a sort of 'toxic' effect comparable to what can be observed in a 'pathogénésie' - testing of the effects of dilution of a homoeopathic medicine on a group of subjects, with the list of the signs of poisoning and their frequency.

It goes without saying that there will be problems concerning the treatment, the doctor, who is sometimes distrusted and the laboratory which marketed it and worries linked to its disappearance since it will no longer be part of pharmacopoeias.

If the measures are taken to avoid a problem of public health, the inconvenience is not slighter...

Linked to an inappropriate treatment or a preventive measure engendered by the reactions of subjects often placed in very different situations, it often poses the problem of their appropriateness as regards the 'benefits'⁷.

If the measure is justified, this is not an evil but if it proves excessive, inappropriate to the genuine needs or if it was taken too hastily, it will be a case of unforeseen turns of events of these 'disaster films'.

If, given the inappropriateness of the preventive measures, they occur too often, they might lead to the reverse of what was expected, namely not following the recommended instructions and putting in place a most harrowing system of announcements.

The fact that those who do not need them 'benefit' from them as much as those who need them becomes a problem.

While not doubting in any way the need for these preventive measures, one may ask oneself why individual reactions and those linked to a different context are not taken into account more.

Not all available factors are used.

And yet they might have permitted more appropriate preventive - and sometimes healing - measures and the integration of their data into 'possibilities' to come⁸.

General interest always takes precedence over individual one... :

What may help the majority of people is put forward...

Prevention *oblige*... : the statistics which very often 'define' the risks to come are applied to individuals. That is not always harmless...

Therapeutic unforeseen turns of events... : they are negligible compared with the benefits - for the majority of people - ... until... panic...

⁷ Recurrent above all in Africa because of the important presence of hepatitis B, liver cancer would have therefore been put forward to justify the need for vaccination against hepatitis B.

⁸ Occurring after the vaccination against hepatitis B, various skin problems, multiplied allergic and ENT pathologies in subjects who had had no problems of this nature before, an unexplained phenomenon of cramps in the right shoulder and their multiplication authenticated by certain osteopaths and acupuncturists surprised at the difficulties they experienced when they tried to restore the balance of a growing number of their patients have engendered many questions from many practitioners. It might also be useful to mention the astonishment of a herbalist chemist surprised at the astonishing increase in the sale of certain of his plants with a hepatic effect in the months that followed the vaccination campaign against hepatitis B, or that of an osteopathic doctor at the increase in hepatic problems difficult to treat. They understood the meaning of this only much later. See also on this subject the thesis in pharmacy by Laurent Haon, *Symptômes et pathologies développés après la vaccination contre l'hépatite B chez 173 patients*, Université Montpellier I, Faculté de Pharmacie, Nov. 2000.

The 'disaster film' occurs in various ways...

They can prove as problematic as positive : what can be engendered towards the patient's involvement in the treatment and struggle against the illness is affected by them... The people who will sometimes be concerned by measures essential to certain but not inevitably indispensable and without any inconveniences to others will be too.

In the present state of affairs and given the statistical perspective, if it is possible to guess, from a qualitative point of view, what the 'therapeutic unforeseen turns of events' will be, it is not possible to foretell what might occur.

It is beyond any calculation and prediction given the factors at stake and the adaptive peculiarities of living organisms : if only as pieces of information about the state of the latter as a whole, individual reactions and hitches on the way have a role to play.

And yet scientific thought takes this factor into account and does not disregard it : it always carries with it a 'limit'.

Put forward from the first and out of objectivity, this limit should always be mentioned again in the conclusion.

To forget this permanent trait is a distortion of the thought.

Hence the problems which will inevitably arise...

The living body has its laws and adaptive peculiarities : its modes of reaction reflect the disharmony that goes through it and, in a reflex response, the reptilian brain always plays a role when the survival of the species is at stake...

The concept of 'limit' carried by scientific thought is not appreciated at its true value.

Systemic approaches and the concept of biological variability show this : the conceptual limits of a perspective which would be strictly based on total reproducibility are mentioned by them.

Causing many current 'disaster films', individual reactions often have no consequences.

If only to examine in more detail their validity and understand their meanings or check their points of view, they are at best mentioned and seldom studied as they should be⁹.

⁹ One should not forget that group work done under the aegis of Prof. Madeleine Bastide, organised by the Faculté de Pharmacie de Montpellier and grouping together conventional doctors, immunologists, homoeopathic doctors, osteopathic doctors and chemists was attempted to this effect. Unfortunately, it had no outcome. The teaching hospital doctor who had asked for its initiation asked to be excused without giving any reason for it after 4 sessions... And yet he had recognised the utility of drawing a parallel between the results of blood tests of subjects who had reacted to the vaccine against hepatitis B and certain homoeopathic types who might visibly have intolerances. Many homoeopathic doctors had been alarmed by the multiplication of various troubles. They were willing to mention their clinical cases and to draw up the profiles of the subjects who were reactive and for whom the frequency or repetition of the doses most probably required examination and the indication for the vaccine should be specified, if only perhaps through biological doses checking the level of antibodies present. It is a pity that this interesting experiment was not carried through successfully. It would most probably have thrown light on the question and permitted to comprehend it better, especially as certain homoeopathic treatments prescribed in case of inopportune reactions had had effects apparently sufficiently positive to rouse the curiosity of that teaching hospital doctor so much that he had asked for the sessions.

This is not astonishing :

If the repetition of certain pathologies attracts the attention of colleagues from different branches and leads to questions, from a 'conventional' perspective, given that it is put under the heading 'therapeutic unforeseen turns of events', which are negligible compared with the benefits, this does not mean anything...

Put down to chance or linked to something else because their message is not understood, certain effects are disregarded.

Except in the case of an obvious and major problem - which can sometimes be anticipated when the morbid potentiality of a homoeopathic type is known - the effective preventive measures are not always actually taken.

The principle which would consist in evaluating the precautions to take in the light of what emerges from the different professions is not taken into account.

The contribution of clinical observers who put forward often visible effects but which can be spotted through other sets of keys for understanding : homoeopathy¹⁰, osteopathy, acupuncture... is disregarded, if not denied¹¹.

What comes from a different point of view is often openly pronounced not very serious and credible, even verging on scientific incompetence.

Inasmuch as what is announced is not part of the positivist assumption on which the conventional approach is based, the shadow of the words 'eccentric' and sometimes even 'deceitful' comes back vigorously. Its contribution is not examined objectively, if only to bring contradictory elements useful to make things easier to understand.

Many experiences oddly mentioning the same type of trouble are often received with a form of 'deafness'.

The fact that it is impossible, unless one is an attentive observer, to connect them at least at first with the initial cause does not make things easier.

And yet the negation of the individual and their reactions impossible to systematise strictly makes the problem worth re-examining and considering appropriately :

It would facilitate the appearance of useful and interesting avenues of exploration for the future concerning the medications on the market and their potential risks as well as the criteria likely to presage greater sensitivity in certain subjects regarding the risks linked to certain pathologies¹² ...

Otherwise, is it possible to think that the policy of observation and then prevention has been satisfactorily put in place ?

All the means that may increase knowledge are useful.

¹⁰ And yet, diathetic components, 'responding types' as homoeopaths see them, perturbations of a certain energy pathway as acupuncturists say might explain them differently, permit to envisage other possibilities for research and perhaps understand their meaning better.

¹¹ And sometimes explored, with partial conclusions which have the same orientations as what has been observed with other approaches : antidepressants about which the question of certain intolerances has been very recently raised by bringing up the 'genetic' problem, Roaccutane®, whose impact has been assessed to the point of adjusting the doses, lengths and frequency of administering and about which a problem of intolerance according to the subject and their history has been mentioned, etc.

¹² This is what happened with Roaccutane®.

In order to keep any ulterior credibility as regards healthcare, improvements should - and can - be brought to it with the contribution of all.

As the various factors which assess the expressed effects of a substance or potential pathology have not been actually explored, is it possible to consider that the threat they entail has been evaluated appropriately in its actual impact ?¹³

One can ask oneself the question.

Individuality, which is an important element as regards the time when it has an influence over the triggering of a reaction, obviously plays a significant role :

Even if it is disregarded most of the time and if it cannot always be taken into account, it deserves to be kept in mind, if only to limit any excessive generalisation that would deny its effects.

Does not one run the risk, if one disregards its presence, of going against what one seeks to do ?

Might not the fact that the caution and moderation as regards prescription which the individuality of the reaction imposes is not taken into account and the obstacles put to any different way of thinking smooth the way for a detrimental refusal or the instinctive or sometimes automatic abandonment of measures which are nonetheless useful and brought about by progress ?

This rejection, without further ado, of what comes from clinical observations and conclusions drawn from a different perspective is problematic :

Paradoxically, it paves the way for all types of abuse : when objectivity without prejudice against facts might make obscurantism and unfounded allegations lose ground, the most important place is left to all sorts of aberrations, into which gullible patients, who have always been attracted to 'magic', will rush and for which they will pay the price.

Seen from different perspectives, certain pathologies might nonetheless be partially prevented, if not lessened or averted.

Certain observation data checked or mentioned on the spot and linked to the work of the treating person provide most valuable information :

To know that certain homoeopathic types are, in essence, more fragile in certain respects than others who are more at risk in others may be useful...

The change to another 'remedy' or diathesis¹⁴, which is a sign of the improvement in or aggravation of the condition of a given subject is not uninteresting...

¹³ This problem is also very rightly mentioned in the thesis by Laurent Haon, *Symptômes et pathologies développés après la vaccination contre l'hépatite B chez 173 patients*. Université Montpellier I, Faculté de Pharmacie, Nov. 2000.

¹⁴ Diathesis : a sort of 'miasmatic' impregnation influencing pathological expressions according to certain characteristic spottable lines.

An objective study of what appears of it in clinical medicine every day might obviously pave the way for other areas of reflection and research.

If it is emerging today, when questions are asked about antidepressants and are still asked about autism, psychotic disorders and ADD, facilitating elements are far from being taken from data coming from 'traditional' medicine.

And yet, its bases coming from the most remote past have shown its importance in its therapeutic contribution...

Perhaps it might lessen the number of 'disaster films' and, if certain of its still very empirical observations were used, avert some of them...

But perhaps one might conclude with the words of a 'medicine man' encountered in a small seminar in South Africa, where various treating people, from the most conventional to the most 'traditional', had met - and who very often work together there...

After asking 'the spirits of his ancestors' to act to make the discussion productive, he said very wisely : 'We who need twenty years to acquire knowledge and be able to treat, we know which herb makes snakes flee but it's up to you to find why and be able to tell us one day !'...¹⁵

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¹⁵ Translated by Pascale Tempka