
I N T R O D U C T I O N

An Apple a Day *Won't* Keep the Doctor Away...

...NOR CAN THE most optimum diet possible, drinking pure water, exercising regularly or even diligently supplementing with mega-doses of vitamins and minerals insure the preservation of good health for most Americans. Unfortunately, in these modern toxic times, our immune systems have been subjected to poisons unparalleled in previous centuries and unimaginable by our earlier ancestors. The placement of toxic mercury amalgam fillings in our mouths, the pervasive petrochemicals polluting our homes and environment, the injection of DNA-damaging childhood vaccinations and the excessive use of antibiotics and other prescription drugs are just a sample of the modern traumatizing effects that have rendered many individuals chronically ill, and, perhaps in some cases, essentially incapable of ever truly getting well. Until these and other “obstacles to cure” are adequately addressed, general guidelines—although important to maintain a healthy lifestyle—are simply no longer adequate to fend off degenerative disease and help individuals regain their birthright of optimal health.¹ Indeed, in our current toxic environment, much more radical measures are required.

I. A Terminal Diagnosis for Modern Medicine

Many health-minded individuals have gone to great lengths to feel better. They have purchased water filters, shop often at health food stores, take nutritional supplements and try to exercise regularly. Some have gone even further and avoid their primary food allergy, purchase herbal and homeopathic remedies when they get sick and do ongoing personal growth work. And yet, for the majority of even these highly motivated individuals, the abundant energy, vitality, and feeling of wellbeing that define optimum health are rarely realized. Further, many live in fear—often unconsciously—of succumbing later in life to cancer, heart disease, Alzheimer’s, or any of the other

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devastating illnesses that have become so epidemic in our modern world. And, sadly, the long awaited cures that doctors, numerous charities and associations and various telethons have been promising us for decades are “just around the corner,” continue to remain elusive.

• **CARDIOVASCULAR DISEASE—OUR NUMBER ONE KILLER**

In 1900, the number of deaths resulting from heart attacks was 27,427; in 2002 it was 696,947.ⁱⁱ These figures themselves dramatically depict the obvious failure of modern medicine to find an adequate treatment for heart disease. However, when another figure is added to the equation—the 2.2 *billion* donated to the American Heart Association since 1949 to find a cure—this failure is all the more conspicuous.ⁱⁱⁱ In fact, *cardiovascular disease*—a more recently utilized category that encompasses all forms of heart disease including heart attacks, congestive heart failure and strokes—is currently the leading cause of death and disability in the US, accounting for 1,400,000 deaths in 2002.^{iv} ¹

• **CANCER—WE’RE NOT WINNING THE WAR**

In 1900, *three percent* of Americans were diagnosed with cancer during their lifetime. Less than four decades later, between 1907 and 1936, cancer rates had risen by an astounding ninety percent.^{vi} Finally in 1971, President Nixon declared a “War on Cancer” and Congress passed the National Cancer Act to try and quell this epidemic disease.^{vii}

Based on numerous media reports over the next several decades, it did appear that allopathic medicine was making progress in treating this devastating disease with chemotherapy, radiation and surgery. However, the National Cancer Institute recently reported that these previously optimistic reports on the decline of several types of cancer were actually false, and simply reflected significant delays in the reporting of cancer cases. In fact, in 2002 this Institute revealed that many cancer rates have, in reality, been on the *rise*, including breast and lung cancer in women and prostate cancer in men.^{viii} And although the often-touted incidence of lung cancer has declined in men, this has nothing to do with new medical treatments or advances in science, but correlates directly with the decline in smoking that began with the surgeon general’s emphasis on quitting in 1964, and the subsequent widespread advertising and educa-

¹ Although it was recently reported that cancer had eclipsed heart disease as the number one disease killer, this statistic did not include Americans over the age of eighty-five. Further, it only accounted for heart disease (myocardial infarctions or heart attacks and angina pectoris or chest pain) and excluded other heart ailments that make up the broader category of cardiovascular disease. However, when *all* ailments of the heart and circulatory system are included within this broader category, cardiovascular disease far outweighs deaths from cancer. (Maugh II, T. Cancer No.1 killer in US, Santa Rosa: The Press Democrat, Jan. 20, 2005.)

tional efforts launched to propagate the hazards inherent in this dangerous habit.^{ix x 2}

Despite this reduction in lung cancer due to quitting smoking, cancer remains our number two killer, and was responsible for 557,271 deaths in 2002^{xi} Indeed, even the ratio of cancer rates have risen, from the previous rate of affecting approximately one in three individuals, to the present percentages estimated by the American Cancer Society of striking approximately *fifty* percent of all men and *forty* percent of all women.^{xii xiii} And, as with cardiovascular disease, although for the last thirty years the medical establishment has been given over *forty billion* dollars in donations to find a cure, we are actually no closer to “winning the war” on cancer than we were a century ago.^{xiv}

• ALLOPATHIC³ MEDICAL TREATMENT—(AT LEAST) THE *THIRD* LEADING KILLER

In the Summer of 2000, the *Journal of the American Medical Association (JAMA)* reported that the annual death rate from *iatrogenic*⁴ causes—that is, deaths caused by doctors through the adverse effects of prescription drugs and surgery, errors in medical judgment, and nosocomial⁵ (hospital-induced) infections—was estimated at 225,000⁶ annually, rendering it the *third* leading cause of death in the US, just behind cardiovascular disease and cancer.^{xv} This statistic would be shocking in and of itself if it weren't for the fact that this 225,000 figure *only* included deaths occurring in hospitals, and therefore excluded outpatient iatrogenic deaths, estimated to be 190,000 annually. Additionally, the author of this *JAMA* article, Barbara Starfield, a physician and researcher at the Johns Hopkins School of Hygiene and Public Health, further dis-

² The incidence of smoking in men began to decline in 1964 after the Surgeon General's warning first became public on the dangers of tobacco. However, the number of female smokers continued to grow for another twenty years. Overall though, the proportion of Americans of both sexes who smoke fell from forty-two percent in 1965 to twenty-two percent in 2000. And due to this reduction, women's lung cancer rates are predicted to also decline. (Santa Rosa Press Democrat, Jan. 20, 2005, p. A5)

³ The term *allopathic* literally means “other than, or against the disease”. Thus, allopathy is the treatment of disease that utilizes surgery as well as prescription drugs that are antagonistic and suppressive to the disease symptoms, e.g., *anti-histamines*, *antibiotics*, *antiinflammatories*, or through the removal (-ectomy) of diseased tissues such as in *appendectomies*, *hysterectomies*, *tonsillectomies*, and so forth. Medical as well as osteopathic physicians are taught allopathic principles and practices in their respective medical colleges.

⁴ The term *iatrogenic*, from the Greek words *iatros* meaning “physician” and *gennan* meaning “to produce,” refers to any adverse state or condition produced by a doctor due to poor treatment.

⁵ The term *nosocomial* derives from the Greek roots *nosos* meaning “disease” and *komeion* meaning “to take care of.” It refers to any disease originating in a medical institution or hospital.

⁶ This figure of 225,000 is only the mortality, or death, rate. It does not include the effect of allopathic care on morbidity—that is, chronic illness or disability as a result of adverse reactions to prescription drugs, errors in medical judgment, or nosocomial infections.

The breakdown of each category within this estimated iatrogenic death rate of 225,000 is:

- 12,000 deaths per year from unnecessary surgery,
 - 7000 deaths per year from medication errors in hospitals,
 - 20,000 deaths per year from other errors in hospitals,
 - 80,000 deaths per year from nosocomial infections, and
 - 106,000 deaths per year from nonerror, adverse effect of medications.
- (Starfield, B. Is US health really the best in the world? *JAMA*, Volume 284, #4, p. 483.)

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closed that this estimate of 225,000 was much lower than the figures arrived at by the Institute of Medicine's (IOM) study the previous year, in which iatrogenic deaths were estimated to range from 230,000 to 284,000 annually.

It is also essential to keep in mind one other crucial fact: typically, iatrogenic deaths are grossly underreported due to physicians' natural reluctance to admit fault.⁷ In this same *JAMA* article, Dr. Starfield divulged that "most deaths resulting from these underlying [iatrogenic] causes are likely to be recorded according to the immediate cause of death (such as organ failure)."⁸ Thus, *most* deaths that result primarily as a result of the adverse effects of drugs, surgery or nosocomial (hospital-induced) infections, receive a diagnostic code of the *secondary* cause of death such as heart failure or kidney failure.

Taking these three factors in mind—the exclusion of outpatient iatrogenic deaths (190,000), *JAMA's* conservative estimate of iatrogenic deaths as compared to the IOM's the year before (230,000–284,000), and the natural inclination of physicians to not admit fault by recording deaths according to the immediate cause of mortality rather than the primary iatrogenic factor (? deaths)—leads to the even more startling possibility that this infamous doctor-induced third place in mortality may be dangerously conservative. That is, if all doctors—those practicing in hospitals, large clinics, as well as in smaller offices—began to properly code and report the real cause of their patient's death *honestly*, this iatrogenic death rate could very possibly eclipse our number two killer, cancer, and might even surpass the number one killer itself, cardiovascular disease.

These appalling statistics are such a frank indictment of the hazards of modern allopathic medicine that they are almost too unimaginable for the mind to comprehend. However, these figures do not emanate from an angry counter culture publication that could be viewed with suspicion, but from the highest bastions of medicine itself—Johns Hopkins University and the *Journal of the American Medical Association*.

It is also important to point out that these iatrogenic deaths are not a new phenomenon, and are only secondary, for example, to a recent spate of newly approved toxic drugs or current imprudent hospital procedures. As reported in another *JAMA* article published in 1998, an extensive meta-analysis of the electronic databases of hospitals from 1966 to 1996 revealed that the incidence of fatal adverse drug reactions (ADR's) caused by prescription medications *alone* have remained quite stable over the last thirty

⁷ What percentage of doctors are going to risk losing their license and livelihood by admitting fault through honestly reporting deaths caused from extremely toxic chemotherapy (and other) drugs, excessive doses of radiation, unwise surgery in an already weakened patient, and so forth, in this highly litigious society? Further complicating the issue, many patients die nowadays while taking two, seven, and even over ten medications at the same time. This typical protocol of "polypharmacy" can baffle even the most erudite toxicologist seeking the actual cause of death. And the possibility of funding by the allopathic medical-pharmaceutical industry to have more autopsies performed to shed light on this matter is not very likely.

⁸ "More consistent use of "E" codes," Dr. Starfield asserts, such as "Complications of Surgical and Medical Care" (ICD codes 960-979 and 996-999), "might improve the recognition of the magnitude of their effect." (Starfield, B. Is US health really the best in the world? *JAMA*, Volume 284, #4, p. 483.)

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years.^{xvi} In fact, the authors in this longitudinal study chose to exclude deaths caused by errors in drug administration to show that “there are a large number of serious ADR’s even when the drugs are properly prescribed and administered.”^{xvii}⁹ However, even when these researchers excluded medical errors, unnecessary surgeries and nosocomial infections, ADR’s alone were still estimated to be between the fourth and sixth leading causes of death in the US for the last three decades.^{xviii}¹⁰

When another alarming statistic is additionally factored in—that although the US spends billions on health care, out of thirteen countries it ranks an average of twelfth (second from the bottom) in regard to sixteen health indicators (e.g., neonatal mortality, life expectancy, etc.)—defending America’s present system of health care becomes even more untenable.^{xix}¹¹

Most recently (May, 2006), “stunning new research” revealed that even though the US spends double the amount on health care on its citizens than England, Americans still have higher rates of diabetes, strokes, lung disease and cancer.^{xx} Even when the researchers “crunched numbers” to remove the influence of lifestyle factors such as obesity, Americans were still found to be approximately twice as unhealthy as their British counterparts.^{xxi}¹² Dr. Michael Marmot, an epidemiologist and co-author of the study, even found that economic status was not a factor. In fact, the *richest* third of Americans were shockingly found to be in worse health than the *poorest* third of the English.^{xxii} However, no researchers speculated on the most likely culprit of our spectacularly high morbidity and mortality rates—the United States’ strong financial commitment to the allopathic medical and pharmaceutical industry, and this industry’s very real and fatal “side-effects.” Thus, the primary tools of prescription drugs and surgery that modern medicine uses to purportedly heal disease have actually reached the infamous position of being one of its top killers—*rendering the cure often worse than the disease*.

The initiation of real change and reform in this seriously flawed state of medical practice has a rather pessimistic prognosis due to the vise-like grip pharmaceutical com-

⁹ A recent (July, 2006) study on just the effects of medication errors found that 1.5 million people are harmed every year, and that at least 7000 of these individuals are killed annually by these iatrogenic mistakes. This study further revealed that hospitalized patients, on average, are subjected to one medication error *every single day*. (Maugh, T. Drug mistakes hurt or kill 1.5 million each year in US. Santa Rosa: *The Press Democrat*, Friday, July 21, 2006, pp. A1 and A13.)

¹⁰ It is important to point out that the researchers also counted deaths from heart disease and strokes separately, rather than including them in the broad category of cardiovascular disease as Dr. Starfield’s study did. This rendered ADR’s ranking fourth with an estimated 137,000 deaths per year after heart disease, cancer, and stroke, rather than third after cardiovascular disease and cancer. And when the researchers applied the more conservative lower estimate of 76,000, ADR’s ranked as the sixth leading cause of death after pulmonary disease and accidents (which again, would have moved up to fifth place if the researchers would have used the broader category of cardiovascular disease). (Lazorou, J., et al. Incidence of adverse drug reactions (ADR) in hospitalized patients. *JAMA*, Volume 279, #15, April 15, 1998, pp. 1200–1205)

¹¹ Countries in order of their average ranking (with first being the best) included Japan, Sweden, Canada, France, Australia, Spain, Finland, the Netherlands, the United Kingdom, Denmark, Belgium, the US, and Germany.

¹² England’s health care system is considered to be generally inferior to its neighbors, including France and Germany.

panies maintain over the majority of doctors. For example, in the January 26, 2006 edition of the *Journal of the American Medical Association (JAMA)* it was reported that the pharmaceutical industry spends approximately ninety percent of its twenty-one billion annual marketing budget on promotions for doctors (approximately \$13,000 per practicing physician annually) in an effort to influence their prescribing behavior.^{xxiii xxiv} And in a related study published in the *New England Journal of Medicine* in 2004, the authors revealed that the pharmaceutical industry funds the majority of allopathic physicians' continuing medical education programs, accounting for \$900 million of the one billion spent on this mandatory ongoing training.^{xxv} Additionally, as reported in another *JAMA* study published in 2005, the pervasive influence pharmaceutical companies wield does not simply start when an M.D. receives his/her license to practice, but begins in medical school where drug companies spend an estimated twelve billion annually on weekly promotions and teaching materials.^{xxvi} In fact, these researchers found that by the third year, medical students either receive a gift or go to an event sponsored by a drug company approximately once a week, resulting in an "environment with progressively fewer boundaries between medicine and the pharmaceutical industry."^{xxvii}

And perhaps even more disturbing, when the American Medical Association attempted in 2002 to educate physicians about the ethical guidelines governing gifts from drug companies, \$645,000 of their \$695,000 education budget was funded by none other than the drug companies themselves.^{xxviii} Thus, our present "bought and paid for" medical system has not only failed to provide the promised cures for serious disease, but it has increasingly come under the pervasive influence of profit-motivated pharmaceutical drug companies.^{xxix} And since prescription drug sales are the fastest-growing portion of health-care costs—at a rate of approximately twelve percent per year—the number of iatrogenic-induced deaths can only be expected to rise.^{xxx 13}

In conclusion, it must be remembered that there are many allopathic physicians and scientists who are truly caring, dedicated and sincerely working hard to find real answers behind this modern epidemic of chronic and degenerative disease. But it is time—in fact, it is past time—for these physicians and scientists, as well as the pharmaceutical industry, insurance companies, government agencies, and the general public to stop and take a hard and unbiased look at these frightening statistics that reveal the very serious level of dysfunction in America's current health care practices.

II. Holistic Medicine Presently Insufficient

Clearly, allopathic Western medicine is an ailing system, and in light of its alarming iatrogenic statistics and dangerous treatments, it is hard to imagine how it could ever be a viable solution to our present health care crisis. But many may ask if holistic medicine is truly the answer, and if it is a viable alternative in the treatment of serious

¹³ Twelve percent is an average figure; prescription drug sales grew at the highest ever-recorded rate—eighteen percent—in 1999. (Angell, M. *The Truth About Drug Companies*, p. xii).

disease. It certainly seemed to be in former times...

From the 1700's through the early 1900's, famous natural healers, such as Priessnitz and Kneipp of Europe and Lust and Lindlahr in America, claimed seemingly miraculous cures for asthma, rheumatism, tuberculosis and even smallpox and syphilis.^{xxxii} Perhaps even more astonishing is that these men facilitated these cures purely through natural methods, such as hot and cold hydrotherapy (water treatments), heliotherapy (sun bathing), herbs, fresh air, rest and simple whole foods.^{xxxiii} These "nature cures" sound quite remarkable—and even highly improbable—today. And, in actuality, the doubt that arises in most reader's minds is not only understandable, but for the most part, quite valid in regard to this issue because, in the majority of cases, these natural measures truly *are no longer* effective enough to treat modern-day diseases or dysfunction.

So what has changed? No one would argue that the world certainly has, but few are aware of the major effect modern toxins have wrought on our bodies. Although the modern industrialized world has afforded us good sanitation and freedom from much of the drudgery of the past, it has also brought with it air and water pollution, chemical preservatives in our foods and toxic metals that poison the earth as well as our bodies. In addition to these external stressors, we suffer the liability of inherited genetic weakness that these pollutants have caused in our damaged forefathers and foremothers. Put simply, we're just no longer the sturdy stock that most of our grandparents (or great grandparents, depending on your age) were. We, therefore, currently suffer from the *double violation* of both a weakened genetic inheritance from our twentieth century-born parents, as well as from the toxic medical, dental and environmental assaults we were subjected to during our formative immune-system building years. Ask any older chiropractor who used to heal a child's ear infection with only one cervical (neck) adjustment, or any retired naturopaths who remember curing menstrual cramps through a few hydrotherapy sessions—patients simply do not respond like they used to.

From this modern day double-whammy of nature (genetic weakness) as well as nurture (environmental toxicity), general holistic health guidelines are simply no longer efficacious. Add to this the fact that too many patients present to the holistic physician's doorstep only *after* their immune systems have been ravaged by medications with two pages of "side-effects" written in fine print, chemotherapy, radiation or aggressive surgeries and the prognosis becomes exceptionally grave. Clearly, stronger intervention is needed.

III. *Radical Medicine's Answer*

In addition to these natural therapies of diet, exercise and rest that were generally prescribed for the sick, both currently and in previous centuries, to further facilitate healing in modern-day patients who typically present with complex issues and multiple toxic insults, one must first be a good detective. That is, in order to truly effect a

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cure it is imperative that the holistic physician or practitioner initially ascertains a correct *diagnosis*, and through that understanding then prescribes an appropriate *therapy*. Just as in quality psychological work, only when we know where we've been can we see a clear direction of where we need to go. In the same way in medicine, the true cause of a patient's disease or dysfunction is always paramount, and when it is revealed through a thorough history, exam and necessary laboratory work, this well-considered diagnosis both signals and shapes the appropriate treatment, or treatments, needed. Thus, one must always endeavor go to the root of the problem in order to fully utilize the knowledge and to master the methods of treatment that are conveyed in *Radical Medicine*. In fact, the term *radical* for this field of holistic medicine was chosen not for its common connotation of "unorthodox" or "extreme," but for its original denotation as that which goes "to the root or origin," and that which is "fundamental, far-reaching and thorough."^{xxxiv}

HOLISTIC DIAGNOSES

The term *diagnosis* derives from a Greek word that literally means to "see through" in order to arrive at a "superior" level of knowledge or understanding.^{xxxv} Thus, a true diagnosis, according to the earliest Greek origins of the word, requires that the physician "see through" patients' various signs and symptoms in order to arrive at such a masterful level of understanding that the actual cause of the disease or dysfunction is clearly evident. For example, "irritable bowel syndrome" (IBS)—alternating constipation and diarrhea with intermittent pain—is not a valid "diagnosis" as Hippocrates and the early Greeks first defined it. However, "irritable bowel syndrome secondary to a gluten (wheat products) allergy¹⁴ and an appendix "scar interference field"¹⁵ *is*—in that it "sees through" the patient's overt bowel symptoms to the underlying deeper causative factors. Further, this more descriptive and holistic diagnosis is much more clarifying and thus often relieving to patients, who in most cases have only received the standard allopathic approach to IBS—that is, "stress reduction" and suppressive prescription drugs.¹⁶ However, when the true cause of their chronic pain and suffering is known, this knowledge helps transform patients' despair into hope, and also into very real and tangible action in order to begin to initiate healing. Thus, this more descriptive diagnosis "sees through" simply the overt symptoms to guide both the pa-

¹⁴ The diagnosis and treatment of food allergies are described in Chapter III.

¹⁵ Scar interference fields and other "dominant foci" are described in Chapter IV. A scar *interference field* is any scar externally (e.g., appendix, hysterectomy, hernia, etc.) or internally (post-surgical scars or chronic infection leaving scars in an organ or tissue) that creates chronic irritation and disturbance in the body. What's so insidious about interference fields is that they rarely cause disturbance locally, that is, the scar is usually quite asymptomatic (has no symptoms). However, scar interference fields often create *disturbed fields* distally in other parts of the body, such as a hysterectomy scar that can trigger intermittent migraine headaches, fatigue and/or depression.

¹⁶ Karl Menninger, M.D., the innovative and brilliant psychiatrist who co-founded The Menninger Clinic in Topeka, Kansas for the treatment of mental illness, noted that the very word *cancer* is enough to "kill some patients who would not have succumbed (as rapidly) to the malignancy from which they suffer." (Goldberg, J. *Deceits of the Mind*, p. 87.)

tient and the physician towards the most effective therapies, as well as the possibility of a real cure through treating the cause and not just the effects of disease.

EFFECTIVE TREATMENTS

In many cases, a holistic diagnosis indicates a specific treatment, or treatments, through simply the removal of what the founder of homeopathy, Samuel Hahnemann, referred to as the “obstacles to cure.”^{xxxvi} In Hahnemann’s day, in the late eighteenth and early nineteenth centuries, these obstacles included the excessive use of opium, “blood-letting in torrents” and the widespread use of mercury-containing calomel powder.^{xxxvii} Sadly, two centuries later, this highly toxic metal is still in widespread use by conventional dentists, and is even approved by the number one dental trade union, the American Dental Association (ADA). Thus, our modern-day “obstacles” still include the removal of mercury through the replacement of mercury amalgam fillings in our mouths with less toxic alternatives (Chapter II). Another obstruction in the way of healing is the slow poisoning from toxic chemicals that are pervasive in every aspect of our lives. However, by simply removing the toxic personal care and cleaning products from our homes and workplaces and replacing them with non-toxic alternatives, this chemical load can be considerably lightened (Chapter II). Additionally, chronic dental *focal infections* such as failed root canals, abscessed teeth, and impacted or incorrectly extracted wisdom teeth can be a major block to healing and frequently the instigator of serious disease. Often these teeth must be “sacrificed” and removed through appropriate *cavitation surgery* methods in order to fully restore health (Chapter IV).

Other efficacious treatments described in *Radical Medicine* have originated in Europe, and are still so esoteric that only a small minority of knowledgeable and holistically oriented physicians and practitioners utilize them in their practice. However, their long-lasting and curative effects are so significant that the use of these remedies and techniques in holistic medicine is truly indispensable. These include *gemmotherapy* remedies from Belgium to gently and effectively drain accumulated toxins from our organs and tissues (Chapter I), and neural therapy from Germany or auriculotherapy from France to treat chronic *foci* (scar interference fields and dental, sinus, tonsil and genital focal infections) (Chapter IV). Another very essential therapy that originated from Europe, constitutional homeopathy, is included in this book because it is the single-most effective healing modality that specifically addresses a patient’s *miasmatic*, or inherited, susceptibility to disease. Recently updated by the revolutionary contributions of an Indian physician, Dr. Rajan Sankaran and his Bombay colleagues, constitutional homeopathy is an essential component to every patient’s healing protocol (Chapter V). Other important treatments detailed in *Radical Medicine* include the use of nutritional supplements and homeopathic *nosodes* in the treatment of *vaccinosis*—that is, disease and dysfunction caused by immunization (Chapter V); the importance of functional appliances prescribed by *orthopedically*-oriented dentists in treating jaw

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joint dysfunction (TMD) and malocclusions (bad bites) (Chapter VI); and the need to address through quality psychospiritual healing debilitating mental and emotional aspects inherent in many individual's early childhood development that can most insidiously generate chronic illness (Chapter VII).

These "radical" treatments are not only of major importance in the cure of many degenerative diseases, but also essential for those individuals who aren't satisfied living with even the "minor" stress of chronic symptoms. Further, these mild aches and pains, intermittent constipation or diarrhea, too frequent colds and flus, moderate fatigue and other relatively functional (versus seriously pathological) health issues, always signal some form of underlying disturbance that—without effective intervention—will only continue to escalate as one ages. *Radical Medicine* is therefore written not just for the seriously ill, but also for those who consider optimal health and the freedom from chronic pain and dysfunction their birthright. And it is further written for those who have done everything that each new best-selling diet book and every weekly magazine inserted in the Sunday paper recommends, but who still continue to suffer from chronic and sometimes debilitating symptoms, or even simply an overall lack of well being.

Radical Medicine was additionally written to educate holistic doctors and practitioners in order that they can more effectively serve the growing number of patients dissatisfied with conventional allopathic medical care. It is especially targeted toward the doctors and practitioners with integrity and a caring attitude, who have been less than satisfied with their treatment results. Through providing the underlying reasons as to why such a great percentage of patients nowadays are so "therapy resistant" and difficult to heal, it is hoped that this book will resolve a great deal of confusion for many frustrated practitioners. Further, *Radical Medicine's* numerous scientific references should satisfy even the most skeptical physicians, and hopefully rekindle the original passion that first influenced their decision to study holistic medicine.

Finally, it is important to point out that addressing and healing all the various chemical, physical and emotional insults our bodies have suffered in these modern times may not be quick; in fact, based on the amount of toxins most of us have been subjected to, it rarely is. For example, the estimated naturopathic time frame for getting well is based on the general formula that it takes one month of treatment for every year an individual has felt unwell. Thus, for a thirty-five year old with a mouthful of amalgam fillings who's been tired ever since her first pregnancy at age twenty, it may take around one and a half years after beginning effective treatment to feel consistently energetic every day. Or for a fifty year old with a history of years of antibiotics prescribed for acne as a child, it can take two or more years to effectively clear the resulting intestinal *dysbiosis* (pathogenic bacteria and fungus) and repopulate the gut (intestines) with healthy flora.

There are benefits, however, to this more-lengthy journey of real cure versus the often-advertised quick fixes. This can be best understood through the spiritual prin-

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principle that we are here to learn and evolve, which is just as true for our physical bodies as it is for our souls. This truth was best expressed by the Lebanese poet Kahlil Gibran in his masterpiece, *The Prophet*, as “Your pain is the breaking of the shell that encloses your understanding.”^{xviii} Thus, examining and clearing these physical obstacles that act both as blocks and passageways to our self-understanding and spiritual growth is an important (and some would argue even an essential) aspect in our psychospiritual development. Further, the wisdom and strength gained from suffering as well as the experience of feeling the demonstrable changes that effective treatment makes in our bodies can instill a profound level of sensitivity and awareness rarely appreciated by those seemingly lucky few who have always enjoyed robust health. In fact, in holistic medicine there is a rather well known but unwritten law that patients who undergo this physical metamorphosis are much more motivated to seek out advanced emotional and spiritual growth work as their healing progresses. And, fortunately, in contrast to the very numerous aforementioned drawbacks of our modern toxic age, one of the major benefits of living now is that psychological and spiritual healing is more accepted today and much more readily accessible than it was even for our parents (or grandparents, depending on your age). Further, these effective psychological therapies and spiritual paths are not just helpful, but essential for those evolved individuals who have healed their physical bodies sufficiently enough to clearly feel the pull and attraction of the truly ultimate healing of self-understanding¹⁷ and Divine love. And that, of course, is always the most radical medicine of all.

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¹⁷ The word *self* here refers to the realization of one’s divine nature or “true” self, in contrast to the separate ego. This was expressed in the ancient Indian scriptures called the *Upanishads* (~ 3000 B.C.) as the *Atman*:

“There are two selves, the separate ego
And the indivisible Atman. When
One rises above *I* and *me* and *mine*,
The Atman is revealed as one’s real Self.
(Easwaran, E. *The Upanishads*, p. 96)

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