

The article below (The Most Respected Profession in America) was published (un-edited!) in three consecutive issues of *Health Freedom News* starting with April 1986 – less than a year after leaving my Orange County, California practice and settling near Princeton on the East Coast. “Leaving” because after three years of flying back and forth twice a month (and it was only after *all* the flight attendants new my name and who I was) that I thought to stop the madness and relinquish my cozy, intimate and successful La Habra practice.

Before the ink on my shiny new business cards had a chance to dry I was assumed a "subversive" by the AMA and brought into a small, dark, crowded and smoky room of the New Jersey Board of Medical Examiners - on the trumped-up charge of "practicing medicine without a license". Apparently the AMA had sent two women, tape recorders purring in purses, pretending to be sisters, in need of help with an "infected" kidney. I was so naïve.

My attorney and I were so successful in warding off the incredulous questions (designed to trap me into admitting guilt) that one of the (pregnant!) board members became extremely agitated and slammed her hand square on the desk. When she screamed in frustration that I had "an answer for everything" the other gentlemen of the board asked her to calm down. Less than six months later - because of my close association with Dr. Carl C. Pfeiffer of the then "Princeton Brain Bio Center" - I was personally appointed by NJ Governor Kean to the Board of Trustees of the Forensic Psychiatric Hospital (recently renamed the Ann Klein Forensic Center) – a responsibility I hold to this day.

Looking back I've had to make some real changes in my attitude and thought forms. It is obvious that - seeing a lot of my colleagues, torn from their daily routine by gun-slashing robots, put in jail, put out of business and out of their profession - affecting good marriages, children and patients - made me scared and angry. My writing reflects that fear and anger.

Gradually the line of demarcation between old-time "traditional" techniques (now more commonly known as medicine practiced with a "holistic" attitude) and the "orthodoxy" - is thinning and fading. By confusing long-term chronic situations with crisis intervention - using the same techniques for both – the medical profession has let us astray. In some places around the globe the two, once polarized and persecuted professions are starting to respect, mimic and compliment each other. Old doctors are dying out and a new generation is picking up the torch despite, and maybe because of, heavy pharmaceutical opposition. I admire and praise these courageous healers. Maybe someday I'll write about the dozens of martyrs I met along the way including lawyers, politicians and the leaders of grass-root organizations who were not afraid to stand up against the giants – all at great personal sacrifice. I'm grateful to have survived this American Holocaust – albeit not without a few deep scars.

It is with these healers in mind and heart that this article is included here - but only as a historical document as it was written in 1984. Because I have not updated it (punctuation excluded) the following few pages show real immaturity - both in thinking and writing skills. Brace yourselves!

# The most respected profession in America

By Dr. Van Beveren

Let's face facts. When antibiotics were discovered in the 1930's (ironically about the same time vitamins were introduced!) allopathic physicians (the word comes from "physic" or to purge – a catharsis!) had an incredible opportunity to use these last-ditch crisis intervention "wonder-drugs" for a world of good. Instead they used them like the proverbial bull in a China shop.

Indiscriminate use of these powerful anti-life substances led to a gradual decline in the integrity of the defense system and also in the natural evolution of genetically altered species of undifferentiated germ life. But the worst result of this discovery was the bulldozing of every other form of healing into submission.

Entire schools of thought virtually disappeared overnight including those forms of medicine that were just gaining a foothold: homeopathy, naturopathy, plant-based therapies, meridian-based touch, nutritionally-based philosophies, wave, radionics and vibratory methods – just to name a few.

Also swallowed by the American Medical Association (AMA) and immediately stifled by the application of an educational and licensing harness where the physical therapies, nursing, psychological profession as well as dietetics. The health of the American people has never been the same since.

Until recently, allopathic physicians were the most compensated, most influential and respected professionals in the world. Surveys taken in the USA showed that medical doctors should be the highest paid professionals due to their commanding respect. And except for some CEO's they are still the highest paid, routinely earning between \$150,000 to \$2,000,000 annually. Few people who work closely with them really respect them anymore – at least not without severe reservations.

Any respect at all cannot be disassociated with the subtlest form of blackmail: crisis intervention. And we, the people, are the wide-eyed hostages. The average blue-collar "patient" (and believe me, they have been!) now works one whole month out of the year just for "dis-ease" care by a virtual monopoly. By heavily concentrating on end-stage crisis intervention medicine (using synthetic drugs and committing surgery to afford a "cure") medical doctors have secured a retirement policy that rivals the gold at the end of the rainbow. Dissidents in their own ranks charge that prescribed drugs often do more damage than all illegal and legal drugs (alcohol, nicotine, caffeine, etc.) combined! These more vocal medical doctors have no compunction about stating that their drugs do more harms than the disease they supposedly cure.

The "Science of Medicine" many are dismayed to learn, is not a system of eternal, truthful principles. Instead it has the consistency of fluid, the stability of quicksand and is as solid as a good wind. Yet millions still believe in a system that "practices" one thing today, another tomorrow ("if this pill doesn't work, then let's try this other one). How many years now have M.D.'s given their patients breast and vaginal tumors with DES,

deformities unspeakable with Thalidomide and who knows what with other combinations of drugs, thyroid cancers with "X-rays" etc? The list is endless and still growing.

More recently they cause malnutrition in their "hospitals" (from the same root as "hospitality"!), leukemia with ultrasound, arteriosclerosis with vasectomies, not to mention millions of addicts with their drugs.

Illiterate when it concerns nutrition they are convinced that annual "check-ups", frequent X-rays and Pap smears every six months prevent cancer. Caesarian Sections are performed to synchronize with their schedule and a hysterectomy is considered no more alarming than spaying a dog. What has gone wrong? How has the American Medical Association become the insensitive giant that it is today?

The answer lies in organization and licensing. The decade around 1850 witnessed the beginning of America's domination of the world. With the country's terrific developments, combinations of capital first formed what is now so feared and fought: the trust. In that period the practice of medicine was not so firmly barricaded behind a wall of silence. There were few even rudimentary laws governing the healing arts and the regulars of those days encountered severe competition from innumerable "quacks" who hung out shingles and practiced as "doctors" (the word means "teacher").

The spring of 1846 found a convention of harassed doctors meeting in New York City to decide upon some concerted action to protect themselves from these inroads. After a lot of talk the convention adjourned to meet again in Philadelphia the following year. This second meeting in 1847 gave birth to what has grown into the Great Trust.

The concern of the doctors at this and at succeeding conventions was and is their personal protection. In those days their objects were a bit more plainly voiced than today, when self-aggrandizement is coated under the guise of solicitude for the public. A resolution was adopted at this convention. It read in part: *"inasmuch as an institution so conducted as to give frequent and united, emphatic expression to the views and aims of the medical profession in this country must at all times have a professional influence and supply more efficient means than have heretofore been available for...exciting and encouraging emoluments and concert of action in the profession...Be it resolved...etc."*

The name of this Philadelphia baby delivered by the harassed doctors was the American Medical Association. This baby, however, was weak and all the doctors could not help it. But though it had the croup and coughed and wailed and was even on the point of death a number of times, it managed to survive.

In 1897 a dose of incorporation, labeled with a pretty official seal was given but even that did not help. It was not until 1901 when the AMA met at St Paul that a group of shrewd men took hold, reorganized the society, and seated firmly in the saddle, sallied forth to ride roughshod over the American people. The real AMA did not begin to function on a large scale until after it was incorporated. A three dollar investment, plus a 30-cent seal legalized the puny spider that was to achieve such gigantic proportions. On March 16<sup>th</sup>. 1897, three gentlemen, upon payment of \$3 to the State of Illinois, received

a paper showing that an organization called the "American Medical Association" was incorporated in that state "not for pecuniary profit" but "to promote the science and art of medicine". Five years after it was incorporated, at the annual meeting, some doctors amid considerable laughter, wanted to know exactly what was meant by their announced object of promoting "the science and art of medicine". This resulted in the filing with the Secretary of State at Springfield, Ill. the real objectives of the organization – so doctors would know exactly what they would gain by joining the association.

These revised articles show the inception of the ambitious plan to obtain control of medical and health activities through a tightly banded group working in harmony for monopolistic goals. The grand scheme is recorded as follows:

*"The object of this association shall be to federate into a compact organization the medical profession of the United States...of safeguarding the material interest of the medical profession...of securing the enactment and enforcement of medical laws...of directing public opinion in regard to State medicine."*

This dead give away stood for two years. During this period the nation was hotfoot on the trail of trusts. After the Sherman Anti-Trust Act in 1900 the various states rapidly followed the congressional lead and also passed State anti-trust acts. The objects of the American Medical Association, as quoted, were recorded in 1902, just in the midst of all the anti-trust legislation. With laws being passed to curb organized and potential trusts, with prosecutions constantly swinging in the courts against monopolies, the recorded plans of the AMA proved somewhat embarrassing! So in 1904, realizing the articles as they stood disclosed too much, an amendment was again decided upon, namely, to eliminate the detailed aims and reinstate the pleasant but vague "to promote the science and art of medicine" as the general objective. This vague phrase still stands today.

Until recently a problematic relationship between doctor and patient was rare not just due to the "wise and gentle healer" image but also because of the new Code of Ethics to which AMA members subscribe. So much has been written about this code and so little is known about it; yet this talisman and its strength lies in just one word: SILENCE! The secrecy engendered by this pall of silence keeps the public in ignorance of vital facts, which threaten its very life. Physicians universally adhere to the code for many reasons, chiefly because it protects them from the consequence of their ignorance or carelessness. So terrific is the force of this silence, so fearful is the average doctor of becoming a pariah among his fellow practitioners if he breaks the code that the truth of what happens in the sick rooms seldom leaks out. Yet more and more, as the public becomes aware and is finally "allowed" to read books like the Physicians Desk Reference, we stumble on several levels of conflicted components - even in so-called "normal" relationships.

The reasons are several: first is the rapidity of various technical developments, machines, tests and other accouterments and the related absence of the "laying on of hands" that was once such an integral part of the healing process. Secondly, this emphasized the contractual character of the relationship, depersonalizing it to the point of mass production. Which in turn, thirdly, forces patients to take matters into their own

hands since they can no longer trust the physician to look out for their financial, emotional, mental and spiritual welfare. These functions have now all been compartmentalized.

The results have been either legal battles - long drawn out costly processes which tie up the courts, cost us all a tremendous amount of money and solve very little. Or the patients turn their backs on the entire crisis intervention system, relying instead on the virtues of prevention, leading a preventative-oriented lifestyle and reducing dependence on the medical profession. Thus even the first medical event (meeting) is severely compromised and controlled by the conscious and subconscious intentions of both doctor and patient. This strained relationship was carried to its point of absurdity when the biologist Jean Rostand wrote about himself: "I am the product of carefully selected semen irradiated with neutrons; my sex was predetermined and I was incubated by a mother who was not mine; I was given injections of hormones and DNA during gestation and subjected to activation of the cortex; after I was born my intellectual development was stimulated by several grafts; at the present time I am having annual treatments to keep my mind at its best and my instincts in full vigor; I cannot complain of my body, my sex or my life - but what am I, in fact?" To which Dr Entralgo in Doctor and Patient replies: "You are a being capable of falling ill and who will fall ill one of these days. And then, in the very depth of your being you will feel the need to be cared for and helped by a special man (!) with special technical knowledge who is prepared to treat you as a friend. In short, a good doctor."

But in the obscene rush by high-priced specialists to lay claim to separate parts of the individual's anatomy - the friend has all but disappeared. We pride ourselves in being not only able to look inside the DNA molecule but to manipulate it as well. And while technology has been a mechanistic blessing without equal, the more creative and intuitive (wholistic) aspects of caring, diagnosing and treating seem to have taken it in the ear with the predictable result, in the words of Dr Milton Fried, that doctors now know "a tremendous amount about practically nothing at all". Indeed, the most important components of the Doctor-Patient relationship, have virtually disappeared. Since "doctors still can't help 90% of the people they see" according to Robert Mendelsohn, a Chicago-based pediatrician, "much of the younger, more educated segment of society has abandoned orthodox medicine in search of alternate health care".

In many cases the results are astonishing; they look and feel better. Drugless healers know and understand that wellness involves more than the absence of disease and much more than taking the "right" medicine. Despite what the barrage of television commercials may seem to imply, our headaches are not caused by a deficiency of aspirin. Instead of the passive patient so common in the past, more people are demanding (and getting) a full partnership in their preventative lifestyle. This relieves the practitioner of carrying the total responsibility and allows him or her to stand back and take a good long look at the clients' habits and patterns.

The AMA has long been aware of the Wholistic Revolution, its continual uphill battle and its slowly gaining strength. That only 30% of all licensed MD's belong to this union (and

a minute fraction of these 40% actually control all MD's in the USA!) is about as painful as a poke in the eye with a sharp stick. Now, more than ever, aware individuals are seeking alternate care. The decline of a quality relationship between doctor and patient is not only forcing many physicians to practice defensive medicine (by ordering tests for diagnostic and legal reasons) but paves the way to facilitate these doctor-patient litigation's to boot. The average malpractice insurance cost for specialists on the West Coast is now considerably higher than the average income: over \$36,000 yearly. By way of contrast, malpractice insurance for alternative practitioners, particularly nutritionists, runs less than \$200 annually.

In "*The Medical Trust Unmasked*" Professor John L. Spivak claims: "medical students are like machines turned out into a world to kill or cure their way to an honored place in society..." Dr. David L. Edsall spoke plainly to the AMA about machine-like students: "Almost all subjects must be taken at exactly the same time and in almost exactly the same way by all students, and the amount introduced into each course is such that few students have time or energy to explore any subject in a spirit of independent interest. A little comparison shows that there is less intellectual freedom in the medical course than in almost any other form of professional education in this country". A medical instructor in 1926 spoke the above quote and we're sorry to report that medical education (from 1926 to 1986) has gone from bad to worse. There still is no freedom to choose the hundreds of diverse ways to diagnose and treat illness. Some resources are summarily dismissed for no other reason than the bias of the educators --more interested in the "scientific method" than the healing of a nation.

For a profession so deeply steeped in modernization, orthodox medicine has a puzzling resistance to New Age (usually "Old Country") ideas from sources other than themselves. While Chinese herbalists have been using acupuncture in anesthesia, pain reduction in chronic degenerative conditions for thousands of years, the AMA was apparently completely ignorant about it until New York Times reporter James Reston visited China with Richard Nixon and doctors there used acupuncture anesthesia in removing Reston's appendix. Maybe that's why the Physicians Desk Reference (PDR) did not become available until 1975. If information is withheld as a professional secret in a shroud of mystery, can it be any wonder that ugly suspicions abound? As a result of the information explosion (thank you computers!) people are becoming increasingly aware of what doctors have known all along: that between 18 and 35% (one in every three!) of all medical tests are unreliable; that prescription drugs still kill 130,000 people each year; that 50,000 people die of iatrogenic malnutrition in hospitals annually; and that 15,000 people die yearly of surgeries that could have been done without.

A big problem, one that has consistently restrained public knowledge and acceptance of alternate ideas and philosophies so far, is that anyone who presumes to offer an unorthodox approach to medical dogmatism soon finds himself pitted against the full police powers in whichever state he practices. No more than 30 years ago the "cheiro" (hand) practors spent as much time in jail as in their office. Now thousands share offices with the medical doctors and many more are well recognized in both therapeutic and preventative sport medicine. But even to this day damaging legislative bills are introduced into the congressional record time and time again. The bills have either of

two purposes: to incorporate the alternate system, idea, technique, test or subject under the direct supervision and control of the AMA or through their puppet governmental agencies (FDA, ADA – and a slew of other A's) or, if that is deemed inconceivable, to crush the idea or system like so many loathsome bugs and the professional practitioners along with it. The AMA, sitting on its white horse for so many years and riding on wave after wave of public popularity because of their "quick fix" policies – still have the clout to enact for laws that are at best not in the interest of public welfare and at worst disastrous for generations to come.

All this continuing litigation on local, state and federal levels is taxing the patience and financial resources of thousands of practitioners all over the USA. As a result of this medical monopoly vs. alternate healers controversy, scores of wholistic medical doctors, midwives, nutritionists chiropractors, naturopaths, homeopaths, acupuncturists, herbalists, clinical ecologists and body workers (just to name a few) have been and are now being harassed, prosecuted, jailed, ruined financially, professionally and more often than not, socially as well. Families have been split and peers for using "unacceptable" nutritional (or other) remedies have invited many a doctor to an early grave in shame. When will it stop? With depressing regularity, under the watchful eye of the AMA, district attorneys are standing in line to prosecute midwives in California, Medical Doctors in Alabama, Nutritionists in New Jersey and Herbalists all over the USA.

Just recently, without much fanfare, wholistic forces beat back a provision in a House Bill sponsored by Congressman Claude Pepper that would have permitted postal inspectors to break into any house or office, without a warrant, and confiscate any and all books and literature not conforming to the "consensus" of the AMA, jail the occupants and subject the violators to a \$10,000 fine. What is really scary is that this bill had over 320 co-sponsors, most of whom later, thank God, changed their minds. And while we do not doubt the good intentions of the sponsors, these bills, if passed into law would have violated the constitutional rights of all Americans who are not in accord with current "medical consensus".

Under the present set of circumstances it takes the manufacturer of a new chemical formula for internal use (drug) between 10-12 years of testing and costs somewhere between \$12-50 million before it can be actively marketed. The new drug is then stringently protected by specific patent laws and with the enthusiastic cooperation of the medical community "the company", in the words of one "detail" man, "makes a veritable killing". Products made from Nature's chemical pharmacopoeia are not so protected by patents and so no research group or pharmaceutical company in its right mind would spend the time or money to scientifically "prove the efficacy" of these ancient, safe and productive remedies. Thus such therapeutics are often withheld from the American public long after their approval and widespread use in other countries. And if they can't be withheld they are often confiscated by our thought police. Even if these products are marketed, physicians are very jittery about recommending them. Knowing virtually nothing about nutrients, herbs, Bach Flowers, other vibrational remedies, drug-nutrient interaction, etc., doctors are under constant pressure from their administrative peers, insurance companies, pharmaceutical pushers and even the Food and Drug administration, to abandon their judicious use.

When a computer designed and programmed to flag physicians substituting other means over drugs or surgery catches the unfortunate practitioner, the harassment begins. The culprit is dragged like a common criminal before a board of his "peers" to be interrogated like some third world spy. In the process some 25 doctors lost their license to practice (and therefore their livelihood) for the "unauthorized practice of medical nutrition" in 1981. This war-like attitude toward alternate ideas among supposed healers is frightening when realized that scarcely 80 years ago most physicians utilized what is now being promoted as a "wholistic" practice. According to the East-West journal (November 1984) powerful elements within the AMA, FDA and others force many physicians (who would rather offer a wider variety of preventative and therapeutic methods) to abandon their lofty ideals for fear of living under the threat of "disciplinary" action.

Around the turn of the century doctors were much more humble. They had better be: they knew full well that allopathy was based on the principle that SYMPTOMS were being counteracted. Antidotes were, and are still today, their basic tools. The only thing that changed between now and then is the complacency of their constituents.

Samuel Hahnemann, MD and Pharmacist, was very aware of the crude methods employed by his colleagues and wanted desperately to find a gentler and more precise approach than the blunderbuss used in this day. He wanted to stop injuring his patients. So after much study developed homeopathy. Even though hounded by his chemist peers wherever he showed his face his creed and battle cry remained the same: PRIMUM NON NOCERE..(first, do no harm). Today, with the "discovery" and addition of over 2000 new chemical combinations every year that is becoming more and more ludicrous.

American physicians, right after the discovery of penicillin, enjoyed an ever-growing prosperity. Difficult as it may be to believe, in 1927 a Harvard Medical School survey of graduates revealed that the only way a doctor could hope to be wealthy was "if he married into a rich family". Maybe this is what is meant by the popular slogan "good living through chemistry". Of course, the tacit understanding is that the good living is enjoyed by the manufactures – not the recipients!. But that's just an oversight, I'm sure!

But the balloon of prosperity, higher now than ever in medical history, is about to spring a slow leak. According to economist Victor Fuchs of Stanford University and the National Bureau of Economic Research, medical doctors are about to fall on hard times. An article published in the New England Journal of Medicine revealed that an ever-diminishing rate at which the disease sector increased its share of the Gross National Product (GNP, now hovering at a colossal 10%) would adversely affect the already bulging supply of physicians. Schools for physicians' assistants have all but closed down. Entry requirements for medical school are becoming tougher and tougher every year. The consensus is that there are too many doctors. They had that same problem around the turn of the last century when the Journal of the American Medical Association reported (in 1901) that "the growth of the profession must be stemmed, if individual members are to find the practice of medicine a lucrative profession". Unfortunately, the AMA had no legitimate reason to restrict its competitors: naturopaths, homeopaths and



osteopaths. So, on the bandwagon of the newly discovered "scientific method" and on the coat tails of wealthy philanthropists like Rockefeller and Carnegie who provided unlimited funds for "science" – salvation was just around the corner.

In 1893 Johns Hopkins University placed expensive laboratories in its medical school. Rockefeller and his sidekick Frederick T. Gates liked the idea and set up the "Rockefeller Institute for Medical Research". Soon the rules were changed and any school not having a laboratory was quickly closed down. Between 1904 and 1929 thirty-six (36!) alternate healing schools went bankrupt due to the diligent efforts of Dr. Arthur D. Bevan of Chicago, chairman of Council on Medical Education and then former president of the AMA. Since labs were expensive and alternate schools did not have the surplus cash of the philanthropists, most schools went bust thus reducing the number of doctors. In 1910 the Flexner report stated that there were still too many doctors. The solution was longer and tougher training, the arbitrary closing of five African-American medical schools, three schools for female medical doctors and a string of drugless schools not benefiting from pharmaceutical research grants. Doctatorship of health care was now placed in the hands of just a very few, powerful, white, middle-class men – planning to quickly move out of the middle class.

What will be the response to today's competitive pressures? While national surveys show that this slowing down of the medical expenditure is being achieved primarily by organization reforms, this same survey identified that doctors are already compensating by taking more and more leisure time – and at the same time raising their prices per unit of work done. With all this extra time on their hands doctors are also taking a long hard look at their competition. While some doctors are using the extra moments to re-read the Oath of Hippocrates and finding the application rewarding on many levels, most doctors are turning their heads toward their union, the Food and Drug administration and the pharmaceutical giants with the intent of creating legislation that will wipe out the wholistic revolution in the USA.

It is the moral obligation of New Age physicians to call upon their still mechanistic peers to re-evaluate and thoroughly re-examine their approach to diagnosis, intervention, treatment and prevention. Competition in Nature is but the superficial topsoil of evolution. The depth of our cultural heritage lies in cooperation, communication and compensation – though not necessarily in that order! Consider that from the 126 medical schools left we graduate 16,000 students per year while only 7,000 older physicians retire each year. At this rate it is estimated that by 1990 there will be a glut of medical doctors to the tune of 600,000 all with a voracious appetite for the dispensing of drugs, committing surgery and living life in the fast lane. Each new doctor that we graduate carries a most important vote: they can either catch their patients below the waterfall after they've been smashed down on the rocks and immediate crisis intervention methods are mandatory for survival – or these same women and men can stand higher on the top, educating their clientele as to the dangers below and helping steer them away by teaching how to live healthy in an increasingly unhealthy world.

Each vote for prevention denies the potentiality of many votes for crisis intervention. Each surgeon that finished his or her residency will perform surgery, regardless. For every disease prevented the US can line its coffers; the employer reduces sick time,

insurance can be lowered and a client can enjoy the fullness of life. After all we are not subjects of our environment – we create it.

In spite of the author's "hippie" persuasion (Amsterdam, mid 60's) the Wholistic Revolution did not sprout from LSD-crazed flower children and grass-smoking cult followers. There were (and are) thousands of physicians aware of their own fallibility who genuinely care about their constituency, who are conscious of their own and their clients' ignorance and are also thoroughly frustrated by their peers' obliviousness to other modes of health care. Such men and women, though still far and few between, are seriously returning back to basics, before they have to retire. Such individuals, abandoning their entire philosophical "home" and embracing with much study and open hearts the wholistic-intuitive-healing relationships, deserve our respect and financial support.

Alas, most doctors still believe (and most patients do too) that sincerity and compassion are worth points. Unfortunately there are still many doctors who are "sincerely" drugging their patients into addiction and as many surgeons who "compassionately" wait until their patients warrant surgery. Concern for the physician's feelings under such circumstances is entirely misplaced. I have met many a patient whom, because they didn't want "to hurt the doctors' feelings" or "because my family has been with him for so many years" act against common sense and allow the physician to continue "his care". Some of these patients were dead wrong.

A physician never stops learning. This is an unwritten part of his or her professionalism. When confronted with new information (such as iridology, reflexology, acupuncture, Bach Flower Remedies, Aroma-therapy, Rolfing, Color Therapy, DMSO, Gh3, Chelation Therapy, Graphology, and a host of other New Age therapies) it is not just choice or privilege *but the duty* of a healer to modify thought processes so that he or she can be objective about new information. It is by no means to be ignored or dismissed with a raised eyebrow or a wave of the hand but to be pursued like buried treasure. Medicine doesn't have to be a profession of tragic heroes.

One reason mainstream medical doctors are so slow to accept alternate viewpoints is that they have been told over and over again that the cure for any and all disease is "just around the corner". Organizations representing every disorder and condition imaginable can usually take advantage of a famous personality whose own life has been touched by the disease in question and is therefore an easy target for obtaining "research" funds. Most of these very sincere and compassionate idols are kept completely in the dark about unconventional methods – as if they didn't even exist. The tragedy is that patients as well as many doctors are being fleeced of their money.

It may be that much, if not the entire "success" of the Wholistic Revolution lies in the undermining of the pharmaceutical giants. Some entrepreneurial spirits are already promoting formidable yet less dangerous alternatives to drug therapy. By emphasizing natural and preventative vitamins, minerals, herbs, homeopathic, flower essences and such, manufacturers are cutting a bigger and bigger slice out of the financial backbone of medical schools. While medical schools vehemently deny that drug money influence

their cognitive abilities, the Internal Revenue Service, which allows contributions by drug companies to be deductible "business expenses" is not so convinced, obviously.

"Doctors" says Robert Mendelsohn "have no shame - they will accept money for anything". Many doctors feel they have no choice. With their home mortgages averaging \$3000 per month, their automobile expenses at \$800 per month and their living expenses ranging from \$1,500 to 5,000 each and every month (not to mention their office expenses, including employees, etc., etc.) it is no wonder that our "wonderboys" wonder where their next dollar comes from. After all, summer camp, bridgework, breast-implants, face lifts, donations, etc. keep popping up – same as everyone else's.

Another way to help the Wholistic Revolution is to force physicians to take a good look at themselves. If everyone drastically reduced office visits to those professionals who obviously are not taking care of their own bodies - it would show you are thinking twice about letting such a person manipulate yours. Shy away from those that smoke, eat like glutton, are obese, breath like a freight train - whose eyes no longer carry a sparkle and whose skin carries the evidence of abuse. Run from the physician whose creed is "he who treats himself has an idiot for a patient and a fool for a physician". Run from the doctor who has no interest in self-healing. "Physician, heal thyself" (though over 2000 years old) is STILL the best advise.

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