

Editor's comment

A different approach



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This edition of *CME* makes a complete departure from the normal, dealing with the subject of mind-body medicine. Some years ago, my friend and colleague, Patricia Lück, asked me if I would be interested in an issue on this topic. At the time I declined. I thought that the topic itself was too new and that my readers were not necessarily ready for something so radically different from conventional medicine. Some of you may still think this, but I feel that the time is now right to examine this approach to patient care.

I am not a fan of complementary and alternative medicine. I am deeply suspicious of anything that purports to help patients without having been rigorously tested scientifically. People's blind acceptance of alternative medicine, while rejecting the conventional, upsets me – particularly as it often costs a lot more! However, this edition of *CME* is put together by well-qualified people with great integrity and I fully accept that they would not use this approach to treatment unless there was a

firm basis in evidence. And, reading these articles, it would appear that the evidence is growing.

When you look rationally and objectively at the concept of mind-body medicine it is not difficult to see how this could be. Many years ago my husband Craig, while doing his PhD in neurophysiology, suggested to his supervisor that the adult brain is, in fact, plastic. This went so far against the accepted conventional wisdom of the time that he was ridiculed for the suggestion. He has now been vindicated – as this edition of *CME* shows – and by many other publications in peer-reviewed scientific journals of high standing. Our understanding of the brain and its interface with the rest of the body is still in the very earliest phases of evolution. We are at the tip of the iceberg, and I firmly believe that, over the next few decades, we will find that still more of our perceived wisdoms about how our bodies work are overturned.

On a more prosaic note, the other appeal of this approach is simply in the extent

to which someone who uses mind-body medicine as part of their practice will interact with and understand their patient. The literature on the clash between complementary and alternative medicine and the more conventional approach is full of references to patients preferring the alternative approach because they feel that the practitioner spends more time with them and takes more notice of how they are feeling. A simple reductionist approach to medicine, looking at the patient as a series of symptoms and signs, must alienate all but the most indifferent person. There is plenty of evidence that doctors themselves are part of the treatment – besides, this approach is more compassionate and caring, something that we as a profession are often accused of having lost.

So thank you, Dr Lück and colleagues, for opening our minds to a different way of practising medicine. I am sure that everyone will take away something positive from this issue of *CME*.

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