

Post-Modern Medicine: Reconciling Traditional and Modern Medical Practice

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Introduction

The article presented here could be perceived as an inevitable and important revolution in the field of medicine. It also provides a new framework within which the formerly exclusive and often contradictory domains of complementary and modern medicine can be reconciled. Post-Modernism, as an unavoidable current and a sign of the times, has also sent shock waves to the medical arena where we can diagnose the harmonization of traditional (alternative, holistic or complementary) and modern (conventional, standard, orthodox, or allopathic) medical procedures and therapies. The objective of this article is to identify this trend, categorize and taxonomize it as a phenomenon and to recommend its adoption in medical training. Indeed, Post-Modern Medicine is the final outcome of reconciling complementary and modern medicine.

First, six crucial points need to be raised:

1) Although the notion of post-modern medicine has yet to be conceptualized, we see its implementation by both its advocates and opponents. Nevertheless, neither group has acknowledged or articulated this increasingly apparent trend.

2) The lack of academic and philosophical knowledge on the subject in terms of training and application, has delayed the merging of traditional and conventional medical practice.

3) The acceptance and acknowledgement of this important phenomenon and its status requires, in the medical community, the conscious rejection of monolithic concepts such as traditional versus modern. Medical practice must assume a new form, one which embodies and harmonizes the historically conflicting notions of the old and the new.

4) The Post-Modern framework in the medical arena is comprised of many parts: modern physics, quantum physics, philosophy, tradition, culture, art and social sciences which collectively make up the whole. It is the holistic character of post-modern medicine which is significant for it is precisely the approach required from training to treatment.

5) The decision to start and implement this approach is increasingly complex; however, in the long-run its implementation can significantly simplify the treatment and recovery process.

6) Re-evaluation of education programs based on this integrative format is a vast undertaking which requires the active collaboration of medical experts, scholars, researchers and administrators.

The Origins of Post-Modernity

Having mentioned these preliminary points, it is necessary to expound on the concept of Post-Modernity prior to getting into the main discussion. Post-Modernity is a ubiquitous force that has penetrated virtually every discipline including architecture, sociology, religion, industrial management, urban design, astrology politics and applied sciences¹. We can even detect its influence in the rigid and unwavering sphere of politics; the dialogue of civilizations for instance, is an effort to endorse the view that cultures and nationalities must work in concert, in alliance, rather than with antagonism or resistance. This is the synthesis that is emblematic of the nature of Post-Modernity.² The first influential characters to have used the expression "Post-Modern" were the Spanish poet, Federico de Emis, (1934), whose prose reflects the combination of both traditional and modern techniques and the historian Arnold Toynbee, who in 1936, categorized post-modernism as a modern philosophical take on human traditions. In fact, the Post-Modern era came into existence in the 1960s, and is still taking form today. Between the 1930s and the 1960s, we saw the transition from tradition to modernity and the development of all that we know to be "modern", scientific and rational. However, the passage to modernity produced its own set of problems, specifically, its failure to reconcile the old and the new. It was this intractability that gave birth to a new historical era - one that succeeded in resolving many of the issues created to submit the modern period.²

Indeed, the post-modern phase succeeded in the benefits of technology, progress and rationalization with the treasures inherited from the past. In fact, post-modernity, embraces all that is emotive, subjective, customary or traditional. It stands in opposition to the starkly objective and inflexible framework espoused and promoted in the modern era. Furthermore, it rejects exclusively quantitative and scientific methods and the unde-

viating adherence to strict accuracy and the probability theory.³⁻⁶ It also denies the concept of Darwinism in medicine, a purely biological medical perspective.⁷ The modern world's lease is over, as was the traditional world's a few decades ago, but the Post-Modern era has not betrayed the fruits of past. Instead, Post-Modernity, in simple terms, consists of a view of the past and a view to the future, the meeting and juxtaposition of the old and the new in a mutually complementary state, and, in other words, "the presence of the past"^{1,6}

All the same, Post-Modernity, in the field of medicine, is still in its embryonic form. Indubitably, it is growing at a steady pace, but it has yet to be fully delivered. This is the task of the medical community upon whom it is incumbent to foster and welcome this new arrival. What is central to this task is the need for medical professionals and educators to alter their perception of medicine. Rather than portraying it as absolute, complete or immutable, they must present the discipline of medicine as dynamic and open-ended. Medicine is an amalgam of art and science, both concepts that are rapidly undergoing reinvention. Thus, we believe, that in effect and in practice, despite a change having occurred in the field of medicine, it has not yet been acknowledged. In fact, on the whole, it has been denied by both conventional physicians and traditional practitioners who have proven to be increasingly apprehensive in accepting this vision.

The Origins of Complimentary Medicine

Complementary or holistic therapy originated when man was created and has been in practice in some form or another ever since. According to many confirmed reports, herbal medicine and other medical branches such as some kind of surgery (even craniotomy), legal and spiritual medicine had been used widely in the north of ancient Iran in 6600 BC, categorized as "Mazd Yasna School". The first qualified Iranian physician, at that

time was Thritha (Qrita or Fereydoon).⁷⁻¹⁰ To the ancient Iran, a human is a microcosmic noetic field and the universe is a macrocosmic one. Interfacing as well as interacting between these two worlds is the main issue of health and disease. This thesis has been the basis for spiritual healing and herbal medicine throughout the centuries in many countries like India, China, Egypt, and Greece.⁵⁻⁸

The mosaic of traditions and cultures across the globe produced a plethora of branches of complementary medicine; for instance, traditional medicine developed in Iran, acupuncture in China and Ayurveda in India.

In recent years, complementary medicine has been the subject of a lot of attention and is gaining more and more acceptance by both patients and the medical society.¹¹⁻¹⁴ Every year, 8.5 percent of adults in the United Kingdom and 4 percent in the United States use homeopathic medicine. In 1998, 40% of Americans made more than 600 million visits to alternative medicine practitioners and spent over \$27 billion for their services (same as what the American public pays for all physician services).^{15,16,21} This is not to say that patients substitute alternative therapies medicine with conventional services; rather, patients add unconventional services to conventional care. In fact, traditional and holistic therapies have been mis termed as “alternative” therapies, for there is no alternative to conventional services, only therapies that *complement* and *supplement* standardized conventional care (integrative medicine).¹⁷

In view of the growing acceptance of complimentary medicine, medical graduates must become familiarized with the principles and methods of traditional therapies. For this task, traditional medicine must be incorporated into the medical curriculum. What is more, research methods and medical technology must be employed to investigate both the known and the unknown in the uncharted waters of traditional medicine. Many issues in complementary medicine have a scientific

and medical nature, which allows us to find a rational solution to the many of the unresolved issues in unconventional care. Such an approach will undoubtedly produce a positive prognosis for the practitioner and the patient for when the many mysteries behind complementary medicine are unraveled, the caregiver is given extra implements (for both preventative and therapeutic services) whilst the patient is offered the benefits of additional care.

We see the success of this approach in effect in countries like India, Mali, North Nigeria, China, Taiwan, France, Sweden and the United Kingdom.¹⁸ In France and Sweden, for instance, strands of complementary medicine such as acupuncture are included, in the syllabus for medical students. In these instances a resistance towards the acceptance of conventional methods was identified for the reason that many medical students associated complementary therapies with shamanism, voodoo or quacks,¹⁹ however, when the details of some traditional therapies were demystified and measured against scientific standards, such concerns dissipated; in fact, many students were happy to be acquainted with their forefathers' medicine.

A popular example of the success of the joint venture between complementary and modern medicine was the appendectomy performed on James Reston, while accompanying former US president Richard Nixon on a trip to China). Both traditional and modern techniques were employed; Chinese acupuncturists performed anesthesia using their own needles, whilst a physician proceeded to perform conventional surgery. We also see successful dental extraction in alternative dentistry using dual methods: dentists use conventional x-rays to determine the existence of a cavity and then employ the alternative therapy of hypnosis as an anesthetic as opposed to using the conventional anesthetic xylocaine. The following list reveals the wealth and diversity of practices that fall under the heading of traditional, alternative or com-

plementary medicine (According to National Institutes of Health classification).²¹

N.I.H Classification

1. Alternative medical systems: Traditional Oriental Medicine, Acupuncture, Ayurveda, Homeopathy, etc.
2. Mind-body interventions: Meditation (TM), Spiritual Healing, Prayer, Yoga, etc.
3. Biologic based therapies (Herbal Medicine).
4. Manipulative & body based therapies
5. Energy therapy

What is Integrative Medicine?

The final result of reconciling and combining complementary and modern medicine is rather more than a simple sum; it stands in higher position with wide holistic view to the patient and health, named Integrative Medicine (called integrated medicine in Great Britain), which is a comprehensive, primary care system that emphasizes wellness and healing of the whole person (bio-psycho-socio-spiritual dimension) as major goals, above and beyond suppression of a specific somatic disease. In other words

*“Practicing medicine in a way that selectively incorporates elements of complementary and alternative medicine (smaller unit) into comprehensive treatment plans alongside solidly orthodox (larger unit) methods of diagnosis and treatment”.*¹⁷

As we know a historical evolution in human development was the invention of gun metal (Bronze) which originated from the mixture of copper and tin. These two metals were soft and combining them resulted into a very hard alloy named Bronze; this example is an illustration of beauty of combining modern medicine (copper) and complementary medicine (tin) and reaching integrative medicine (Bronze) which is practical and precise.

Conclusion

In our view, despite the evident resistance to unconventional services we do see a gradual acceptance of the integrative trend. The fact that hundreds of articles on the subject are written in scholarly journals and that numerous institutions (including those set up within medical faculties as well as independent centers) dedicated to research on traditional healing have been established in the past decade proves the gradually-increasing acceptance of post-modern medicine. For this reason it is all the more crucial to standardize and regulate complementary services and to weed out those services that are largely based on superstition and charlatanism.

At the same time, the masses must also be educated. For example, a prospective patient must be cognizant of the fact that it is unsafe to rely solely on complementary therapy. Diagnosis, which is done best by conventional therapists, can be dangerously delayed in cases where patients visit a traditional caregiver before seeing a conventional practitioner. Here, we also see the need for educating traditional therapists, who would with training, be aware of the need for sending the patient to a conventional physician first.

Post-Modernity has shown its influence in the medical arena despite the majority of physicians have shown resistance towards it. Nevertheless, the reconciliation of traditional and modern methods is taking place, as its benefits for the patient have become glaringly clear. For this reason, it must be accepted an acceptance, fostered by the medical community. The objective of this article is to highlight this trend and to recommend the development of a forum for further discussion of this phenomenon. It is also an effort to encourage a new perspective in the realm of medicine: a view from macro to micro rather than from micro to macro. This approach gives room for the unification of non-conventional and modern medical therapies, which in turn permits the patient to experience the benefits of the old and the new.

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