The Topography of Healing from East to West

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Introduction

“Healing is not the same as curing. Healing does not take us back to what was before, rather, Healing brings us closer to our true Self.” Anonymous

As a freshman I applied to Western, because of its prestigious broadcasting program. During that spring semester of that first year, I excelled as I watched my high school sweetheart Bradley’s health mysteriously deteriorate. As the summer began, he was diagnosed with Hodgkin’s disease. Hodgkin’s disease is a type of lymphoma. It is a malignant cancer of the lymph nodes, spleen, liver, and bone marrow. Although Hodgkin’s disease treatment is well established and has high success rates, I felt completely helpless.

The only thing I knew to do was to learn as much about the disease as possible. Books about cell cycles and how abnormal growth begins and articles describing cell adhesion properties and how cancer spreads led to a fascination with biology. By December, Bradley had finished a grueling round of chemotherapy and radiation. This also ended my first semester as a pre-medical student. This personal experience inspired me to become a doctor. I know how it feels to be confused, vulnerable, and powerless. As a physician, I wanted to make sure patients and those close to them feel secure during the difficult times associated with sickness.
Two years late, registering for the MCAT solidified the fact that I would soon be applying to medical school. As exhausting and terrifying, as the process may seem, the medical profession is an esteemed career with unique responsibilities. Patients and their family members place their trust in these individuals every day. They hope that the physician will sustain, protect, and enrich the health of their patients. This delicate, vulnerable bond is fostered between people involved in the healing process by very different reasons. A map of healing can be analyzed from east to west.

The research I have done will, hopefully, benefit me in the pursuit of knowledge and in my future career. However, my hope is that my conclusions will create a spark, igniting the spark of openness to diversity in healing by providing unbiased knowledge. By providing a historical foundation of the practice of Western biomedicine as well as Traditional Chinese Medicine, I will attempt to identify the strengths and weaknesses of each methodology. From this, I can elaborate on the social and philosophical barriers impeding their integration. Finally, I will propose a resolution that incorporates the variations to assimilate a novel model for healthcare. Because of this personal and career association to this ongoing research project, I hope that, by sharing my current conclusions, you will formulate your own individual connection to this economic, political, and social issue.

I. Traditional Chinese Medicine

“Maintaining order rather than correcting disorder is the ultimate principle of wisdom. To cure disease is the ultimate principle of wisdom. To cure disease after it has appeared is like digging a well when one already feels thirsty or forging weapons after the war has already begun.”

The eastern healing style has been compared to that of a gardener, cultivating life (Beinfield and Korngold, #.) A gardener does not make the garden grow, nature does (Beinfield and Korngold, 33.) Practitioners aid the process of healing by nurturing the interaction of the
garden (the human body) with its environment (Beinfield and Korngold, 33.) True to the preventative nature of Traditional Chinese Medicine, the gardener controls the presence of certain elements access to the garden. They are also responsible for watering the garden before the sun scorches the plant or providing irrigation so that the plant has proper aeration and drainage. Chinese practitioners anticipate and prevent the progression of certain diseases and ailments in this manner.

Within this system, nature is defined as a unified system called Tao (Beinfield and Korngold, 29.) Tao is further composed of polar and complementary pieces called Yin and Yang. When these elements are in balance, life is peaceful and thrives. However, when this equilibrium is lost, the results are devastating. Nature is in constant motion, following cyclic patterns that describe the process of transformation (Beinfield and Korngold, 29.) For example, of the three main philosophies of Chinese medicine, there is the Law of the Five Elements (Sheikh and Sheikh, 65.) It is comprised of two cycles. The first cycle is the Shen Cycle or Cycle of the Spirits and the second cycle is the K’o cycle.

The force that allows life to exist is called Qi, pronounced “chee.” Although this is an invisible force, its effects can distinguish and define it. Qi has its own movement, causing the movement of other things (Beinfield and Korngold, 32.) This causes motion and heat. Matter is Qi taking shape. For example, mountains forming and forests growing are all manifestations of Qi as well as all physical and mental activities (Beinfield and Korngold, 32.)

While Qi is the totality of everything, the body can be defined by investigating its three parts. The body is divided into blood, moisture, and Qi. Blood is the material form of the body and the tissue that comprises it. Moisture refers to the body’s internal environment. Qi is essential for the health and sustaining human life. Within the human body, correspondence
occurs. In order for a larger system to be in balance as a whole, each smaller system within itself must be balanced (Beinfield and Korngold, 35.) For example, in order to produce a single, unified sound, an orchestra must ensure that each instrument is in tune.

There are several factors that influence the health and existence of the body within its world. Yin/yang, five phases of wood, fire, metal, earth, and water, each of which corresponds with five organ networks, five seasons, five climates, and five personality types all determine the health of the body (Beinfield and Korngold, 40.) More specifically, wood represents potential activity, fire represents actual activity, metal represents potential structure, water represents potential structure, and earth represents neutral indifference.

“This we know the earth does not belong to man, man belongs to the earth. All things are connected like the blood that unites one family. Whatever befalls the earth befalls the sons of the earth. Man did not weave the web of life; he is merely a strand of it. Whatever he does to the web, he does to himself.” Chief Seattle

Therefore, when a part is bad, the whole is bad as well. What is good for nature is good for humanity (Beinfield and Korngold, 30.) For example, the increasing levels of carbon dioxide emission are leading to global warming. Because of this, a hole in the ozone layer has been identified near New Zealand. Its people suffer from higher rates of skin cancer and must exhibit higher efforts and care when going outside of their homes. It is also speculated that global warming will exhibit other effects worldwide, if its progression is allowed to continue. What is good for one person, is good for all (Beinfield and Korngold, 30.) What damages one person damages all people. Although the AIDS crisis was only associated with the gay community in its early years, warranting the United States to dismiss and ignorantly disregard this deadly disease. Now, our world is faced with an epidemic of disastrous proportions. So, the Eastern
system has significance due to its ability to restore balance. This enhances self-healing and the Eastern system’s ability to help chronic, long-term problems has resonance.

II. Western Biomedicine

“All science is certain, evident knowledge. We reject all knowledge which is merely probable and judge only those things should be believed which are perfectly known and about which there can be no doubts.” Descartes

Western healing can relate the doctor’s role to that of a mechanic (Beinfield and Korngold, 20.) Although some routine maintenance may occur, this type of medicine is an intervention. For example, a type of preventative treatment can be seen in the recommended yearly exams for females. These visits are designed to aid in the detection of breast and ovarian cancer. Unfortunately, there are more examples and a larger percentage of patient visits to the doctor are most often required when a problem already exists.

Treatments are standardized; the same diagnosis receives the same treatment. These treatments are usually directed at curing the symptoms. Western practitioners assume that diabetes is caused by the inability of the pancreas to adequately produce insulin. However, a better question is why is the pancreas unable to sustain normal function? Recently, obesity has been linked to the development of diabetes. Therefore, if this disease can be induced, what factors should be studied? How does obesity affect pancreatic functionality? However, illness in Western medicine is reduced to simplistic causal thinking. Loss of health is a domino effect of a linear series of events.

Conversely, it is this efficiency that allows Western biomedicine to successfully treat patients with similar symptoms. It also allows physicians to converse among each other. This communication among practitioners is important in furthering the understanding of disease and
illness. Young doctors rely on what they see during their internships to guide them in future cases. They apply knowledge in a similar situation in the past to a future case. This critical thinking is a positive feature of Western biomedicine.

Two key historical figures have influenced the way Western biomedicine works. Western healing practices effects structural components, suppresses or eliminates pathogens, and intervenes in life-threatening crises. This can be attributed to Descartes’ idea of the separation of the mind and body. The ability to break the whole into its component parts is a reason why knowledge of anatomy was valuable. Literature such as Grey’s Anatomy has led to the enhanced understanding of the material composition of the human body. From this, surgery has become another treatment option available to Western doctors. A surgeon was quoted as instructing that, “A chance to cut is a chance to cure.” Surgery’s recent successes in transplantation, tumor removal, appendectomies, and even breast implants are a testament to Western biomedicine’s focus on the individual pieces of the body.

A second figure was Louis Pasteur. Pasteur introduced the germ theory of disease. Also known as the pathogenic theory of medicine, the Germ theory of disease states that microorganisms are the cause of several diseases. Once this theory was generally accepted, it fostered the focus on simply finding the cause of disease. His conclusions led to the promotion of healthier practices for individuals and society (Cassedy, 13.) Better public sanitation methods were implemented to decrease the number of microbes. This included proper removal of human waste products. Personal hygiene was encouraged. Doctors began washing their hands between patients, areas of practice were cleansed and sanitized vaccines, and instruments used were disinfected. This minimized the spread of disease to a minimum by limiting the amount and concentration of the exposure of individuals to certain types of microbial life. Vaccines and
antibiotics were also engineered for the prevention and treatment of bacterial infections. This trend began the belief that there is a pill for every problem.

III. Synthesis and Conclusions

“We are much like the mountain climber who sees one great mountain before him. We scale the peak in the belief that, once there, we have reached the summit of all existence. It is only when we get to the top that we can see the vast ocean of mountain ranges stretching on before us. The more that I climb the mountain of health and healing, the more I realize how much I do not know and how much more there always is to learn.” Anonymous

Before examining the differences that divide the two systems, it is essential to explore the similar foundations on which each system was established. Both systems are based on religion and philosophy, implicating a direct relationship with God or nature (Sheikh and Sheikh, 65.) While Eastern methodologies maintain this belief system, Western biomedicine generally discredits these associations by valuing the pursuit of empirical knowledge and concentrating on the physical body. Originally, the healers, east and west, were shamans or priests. Western practice can be traced to ancient Greece with the Oracle of Delphi where the sick came to the temple and were diagnosed by priests (Sheikh and Sheikh, 65.) This Greek influence still has significance today. New physicians pledge their adherence to the oath of the Hippocratic creed. The staff of Asclepius with a serpent’s head pointed downward to signify “mastery over sickness” has been adopted as a significant medical symbol.

Parallel philosophical instructions are found in the written accounts of Chinese medicine that instructs, “The most important requirement that the art of healing demands are that no mistakes or neglect occurs” (Sheikh and Sheikh, 65.) The Hippocratic oath directs, “First do no harm.”
While they share similar goals and objectives, their means of attaining these goals divide the two systems.

The division began with the acceptance of Descartes’ idea about the separation of the mind and body, which encouraged the treatment of the body to cure the patient. The individual parts of the body are isolated and separate from the entire body as a system, and the mind and social context in which the body exists. This physical reductionalism separates the body from the mind, social, political, and economic environment in which it exists. For example, in surgery, only the part of the body that is being operated on is exposed. The rest of the body is covered. Pasteur’s influences on causation led to the increased importance of a specific diagnosis. Because of this, the Western methodology is linear and places great emphasis on differences (Sheikh and Sheikh, 67.)

The mind and body are divided into separate entities. The symptoms are treated, instead of the whole person. While this may effectively remove a tumor through surgery, rid the body of an infection using antibiotics, or replace old hips or a faulty heart, Western biomedicine does nothing to prevent the necessity for these treatments. Additionally, it cannot prevent the patient from requiring these procedures or others in the future.

This focus on treatment has been established where a concrete diagnosis is imperative. An exact common language has been established (Cassell, 5.) This has led to a generalized conception of a sickness, disease, and illness instead of individualistic cases (Cassell, 5.) This can be exemplified in the remedial prescriptions recommended that are directed on the cause. For example, beta-blockers and calcium blockers have certainly aided in the treatment of coronary heart disease, but neither targets the true cause of the disease. Understandably, this
reveals nothing about the sick, the patient’s behavior, or patient-doctor communication (Cassell, 6.)

Limiting the source of disease to an individual external source provides a limited scope for healing. The doctor is seen as a heroic, powerful authority figure that cures disease (Beinfield and Korngold, 24.) This belief also excludes the internal sources, leaving the patient with little or no responsibility. Conversely, the patient is to blame for not getting better by the physician. If their prescribed treatment is not working, the patient must not be following the regiment advised.

On the other hand, patients blame their doctors for their problems due to the arrogant façade that science knows more about the sick person’s body than that person will know or understand. This creed empowers the physician’s medicine and technique rather than their state of being as healing with the ability to apply their knowledge, experience, and critical thinking capabilities. An increase in malpractice litigation as revenge can be attributed in part to the responsibility attributed to doctors by their patients.

This concrete role of the doctor as hero or villain creates a duality within the healing process. The dynamic nature of the body is also dismissed (Cassell, 8.) For example, a patient with heart disease should be examined as a person. If they have an unhealthy diet, don’t get enough sleep, have a stressful job, or smoke also play a critical role. Prescriptions should be more than pills. Healing and prevention should be recognized as having as much importance as the treatment itself.

Conversely, Eastern medicine has continued to be a preventative system, resisting change throughout its history. Unlike Western biomedicine, the Eastern way is circular, striving to maintain oneness with the universe and continually seeking balance and harmony within this
oneness. Individuals are unique within the overall oneness. Therefore, patient treatment considers their entire mind, body, and spirit. Healing is assisted and encompasses a variety of entities, peoples, and systems.

While acknowledging that a disease can have an external cause, all disease has an internal cause. As a result, the patients are directly accountable to themselves and the healer and love are required for restoration of health. This ability to work at the root of the problem rather than the symptoms of it is a defining difference between the institutions.

However, there is a deficit in research proving the success of the treatments used in traditional Chinese medicine. The side affects and the possible interactions associated with these practices are not known. It would also be considered less efficient by Western standards. The time associated with the patient consultation would increase. Often, the prescribed treatment is not static. The type of treatment, dosage, and other factors may change dependent on the practitioner. This would be impractical in eyes of Western biomedicine, where the treatment is usually a set regime to be followed until completion.

Traditional Chinese medicine relies on testimonials and the tradition in order to gain validity. Unfortunately, training is not systematic, leading to a discrepancy in the professional standards of practitioners. This leads to questions about the practitioner’s qualifications. In addition, there is a lack of supervision and monitoring of practices of the practitioners.

Western biomedicine has established a more rigid pathway for medical students to follow in order to become physicians. The selection of the students attending medical school is competitive. In the United States and Puerto Rico, there are 126 allopathic medical schools. In the fall of 2005, 37,364 applicants and another 17,004 seats allopathic medical schools. This
means that there are approximately 2.2 applicants per opening. In order to overcome this selectivity to become physicians must follow a strict undergraduate regiment.

First, students must complete a challenging undergraduate pre-requisite schedule of courses focusing on biology, chemistry, and physics. Before they can attend medical school, they must take the Medical school admissions test. This test includes three distinct sections and a writing passage assessment. Physical sciences (physics and general chemistry), and biological sciences (organic chemistry and biology), and a verbal section are all tested. In addition to evaluating the test-taker’s knowledge, time management skills, and critical thinking abilities are also tested.

Their application must also reflect their qualifications. Undergraduate research and experience in the respective field is highly recommended. A personal statement solidifies the applicant as an individual. This is an opportunity for a candidate to present any research experience, relevant field practice, or any personal experiences. This allows the interview panel to gain insight that would not be able to get from an application. Then, an interview to assess personal skills is another element. Once a decision has been reached, admission boards eliminate numerous hopefuls (Konner, xii.)

After this first cut, medical school formally educates its students through classroom and clinical experience. When this is completed, residency begins. In addition, another examination is given to ensure the quality of the practitioner. While there have been issues raised about this method of training, it does have structure and provides its participants with foundational knowledge and experience to practice within the context of the American medical system. Society as whole, submits to the authority of credentials. Many physicians proudly display their certifications in frames within their offices. However, it is important to realize the importance of
a simple piece of paper. While patients would not continue to see a Western physician who they or others did not believe was effective, Traditional Chinese medicine more directly relies on previous successes in treatment. The successful treatment of others also aids Traditional Chinese healers.

Americans also respond to uniforms. Western biomedical practitioners are associated with the uniform of the “doctor’s white coat.” While this recognition is important, it also deters some from questioning this authority. This can be seen in the horror stories of patients who have traveled to Mexico to receive cheaper plastic surgery. While many felt something was wrong, their inhibition could be related to the trust in the authority of medical practitioners who were outfitted in the typical dress of professional Western biomedical doctors.

The role that these healers have within the context of their society is also important. Their economic and social status is another difference between the two systems. In Western society, the monetary compensation and prestige associated with the medical profession is undeniable. For traditional Chinese medical practitioners this is not as prominent.

It is important to acknowledge the market-driven health care system in which American practitioners serve. Within this system, there is a division of care among the social classes. In response to this, we must pledge to provide all Americans with a fundamental level of care, such as immunizations for children. The co-pay for medical attention should reflect, the quantity of usage by the individual, type of usage, and level of income. Patients should be given the freedom to choose the hospital or doctor that administers their care. Insurance companies must fairly reimburse doctors for their services. Also, hospitals, and nursing homes should be required to provide an adequate number of staff and provide appropriate salary for those individuals.
The more folk-based setup of traditional Chinese medical practices could be seen as a more raw method of providing healthcare. It does not have the ills Western healthcare has embedded within its structure. Much monetary investments and time is invested in the business of medicine rather than on the medicine itself in America. Instead, traditional Chinese medicine focus is on the actual process of healing.

Increased frequency of malpractice has created a certain potential for hostility between the doctor and patient. This crisis has provided a unique opportunity to reevaluate the current system and reinstate an innovative model that more effectively facilitates and more efficiently benefits the patients, doctors, and national budget. The Eastern system would benefit and better facilitate this new model. If a way of life were marketed to the American public, illness and disease prevention would diminish the numbers of patients afflicted by the health crisis’s we face today. Diabetes, obesity, and heart disease are all serious health concerns today. These are all examples of disease that can be prevented or better managed by certain lifestyle changes. On a personal level, a better patient relationship would be fostered within the healing environment. Overall, the American public, including doctors, patients, government and all involved in the health care system would benefit.

In order for this task to be accomplished, with the incorporation of Eastern medical practices, the evolution of the Eastern system is also necessary. A solid scientific evidence base for the practices must be compiled. Without this, our fact-oriented society will be unable to justify the significance of their methodology. Eastern societies still practicing the traditional healing processes would benefit as a whole to distinguish which practices that they use are effective. The side affects and interactions among treatments must also be more thoroughly understood.
Next, the regulation of the teachings of this system is vital element in creating expected standards of practice of the practitioners within the Traditional Chinese healing system. Then, registration of these individuals would monitor and preserve the quality of those who choose to practice within this system. Finally, an organization that would promote the traditional Chinese medical system would extend its influence and spread its philosophy. At this point, integration into America’s biomedicine would be feasible.

The strong conviction and faith fostered in biomedicine by American public creates a potential roadblock. Therefore, the American public and physicians should be educated about Eastern practices. It is also important to consider that the underlying theory of Western biomedicine as well as traditional Chinese medicine is what comprises each system. The unique qualities both systems possess are the reason for their strength. Because of this, complete integration and pure fusion would mean losing some part of each methodology. Yet, the entirety of Eastern and Western practices is critical to its successes. I propose hospitals, clinics, and other facilities providing health care house practitioners of both practices. Each should have a solid knowledge base of both ways and provide an environment of education and choice to the patients, keeping their best interests in mind.

Returning to the analogy of the body as a garden, the incorporation of both systems can be demonstrated. While traditional Chinese medicine can, as earlier described, be a preventative system, there are times when intervention is inevitable. It insects infect the garden, pesticide, when properly used may aid in alleviating this problem. When a bacterial infection ails the physical body, antibiotics can effectively remove or balance the quantity of these microbes. Genetic engineering of resistant plant types can be equated to people who have received vaccines against certain diseases and illnesses. As you can see, incorporation of the strengths of each
system can more comprehensively preserve the health of the body. Health is more than the absence of disease. It can be more.

There are numerous motivations and incentives to evaluate and critique current biomedical and traditional Chinese practices. Increasing popularity of traditional Chinese practices has introduced Americans to Eastern practices (Wong.) This has led some to question this as a holistic hoax. Others romanticize this ancient tradition, without logical analysis or understanding. Neither of these ways of thinking is plausible.

The competitive nature of the American society has enticed new doctors to become educated on Eastern systems. However, simple avocation or deterrence simply is not acceptable. More importantly, practitioners should provide patients with unbiased information in order for patients to formulate their own informed decision. Both systems can only be understood and appreciated when they are considered within their own context. Eastern and Western medicine cannot be interchanged or translated; they can only be fully understood separately.

During the time it will take for both practices to make modifications, the best action to take is to make sure patients know their options. In the future, I hope that a more complete interaction between the systems will be realized. Hospitals should offer the practices of Western or Eastern philosophies for treatment. This cooperation would bolster healing and ease the division of healing practices. Harvey Cushing, the famous neurosurgeon who pioneered brain surgery, once stated that, “A physician is obligated to consider more than a diseased organ, more even than the whole man - he must view the man in his world.” Only when this vision is realized will journey for true healing begin.
“Bibliography”


