

MEDICAL CARE FOR THE AGED

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In the current national contest for votes, both Democrats and Republicans have promised in writing to use Federal resources to bring medical care to the aged. So philanthropic does this seem on the surface that politically it is gold. And statistically, in this fair year of 1960 with the mountains of dire problems that crowd on society, so much is being said about the mounting proportion of the aged among the people, that the proposition takes credit for being forehanded. And again, the mounting proportion of the aged among the people is generally characterized as one of the great glories of modern medicine. all the more reason, therefore, why modern medicine should be subsidized by taxation to take care of the aged.

Rather than soft-heartedly stampeding with the politicians, it might pay to examine a bit more closely. Perhaps under the surface some facts lie that have not been taken fully into account.

Consider, for example, the case of Candidate Nixon at this writing. Accidentally, according to news reports, Mr. Nixon banged his knee on the door of an automobile. Many, of course, do that every day. There would have been no news value in the mishap except that the knee belonged to Mr. Nixon and in time the combination of the bang and the state of Mr. Nixon got the knee "infected". The thousands of knee bangs on car doors that go unnoticed do not bring on infection, but according to the reports the bang that Mr. Nixon took did.

So Mr. Nixon is put to bed at one of the great centers of modern medicine, and, according to the news reports, what is the treatment? Five different antibiotics and the knee is in traction. The design of antibiotics is not to affect Mr. Nixon but to destroy the microbes of infection. If everything proceeds according to design, and no complications arise, Mr. Nixon will emerge no better than before. His ability to remain well even though he bang his knee again will not be enhanced. It is not the aim of modern medicine in cases of this kind to deliver the patient at the end of treatment any better than he was at the beginning; yet modern medicine feels no hesitation about taking full credit for the longer span of modern living.

In the healthy process, the patient overcomes infection by his own innate power. This goes on all the time in health, whether the knee gets banged or not. Agents of infection abound everywhere all the time. What happens in the case of a local injury merely focuses attention for the time being on the local spot, what goes on there is merely a detail of what is going on throughout the body every second of the life span. For that reason, treatment, if it is scientific, aims not to take over the job of healing and thus

weaken the innate power of healing, but to sharpen that power; and the remedy, if that is scientific, is a force similar to the innate healing force and able to influence it. Such a remedy delivers the patient after treatment better able to stay well.

But to say that modern medicine delivers the patient no better after treatment than before does not quite post the entire score. A hint as to the rest of it comes in the promotional pitch every summer and fall for polio shots. Polio was traditionally called "infantile paralysis". When President Roosevelt instituted the fund for research in polio, it was named officially the National Foundation for Infantile Paralysis. But in the comparatively short time since, polio has become an adult affliction and no one is supposed safe from it who is under 40. Another hint comes in the promotional appeals for research in cancer. Until recently, cancer was an affliction of maturity and old age. But now the Children's Medical Center in Boston is established largely to deal with cancer in children, the drive for money is a drive for the "Jimmy Fund", and baseball's Ted Williams is armed for his well-intentioned plea with the statement that cancer takes the lives of more children than any other disease. The latest is infants *born* with cancer. A third hint comes in the mounting concern over mental health. It might appear from the wording that mental health is a particular kind of health, or that a person may be in excellent health in all but the mind. But the great alarm is over the staggering increase of mental illness, already, it is stated, to the point that more hospital beds are occupied by mental patients than by any other kind, and mental hospitals cannot be built fast enough. There is a fourth hint bigger than these three. According to the United States Public Health Service, the chronically ill are those persons who are not expected by the standards of modern medicine ever to be well again. There are the diabetics, the sufferers from Bright's disease, the rheumatics and victims of neuritis and arthritis and Parkinson's disease, neurotics, those with ulcers and tumors, with asthma and hay fever and other things called allergies, and so the list runs on. Swept into this statistical hopper and called officially the chronically ill, according to the Public Health Service, are upward of one-fifth of all the men, women and children of our fair land. As modern medicine advances, according to the same source, the ratio of chronically ill also advances. At the present rate, in a short time it will be one-fourth. Since by all the collected data this state of affairs obtains where the highest standards of living, the greatest wealth, and the most prevalent modern medicine are the rule, it can only mean that modern medicine in wide practice lowers the general health and multiplies the health risks especially in advanced years.

There is every reason for this. It results every time that a medical treatment suppresses. Suppression is something the homœopath, by reason of his training and the experimental information at his disposal, understands. He can see in any given case when and how it takes place. He can by means

of the homœopathic remedy set aside suppression and substitute cure. Suppression, no matter how well it may seem to clear certain of the symptoms, leaves the patient almost condemned to further trouble later on that is harder to cure. Repeated suppression, which is the lot of the patient under ordinary medicine, compounds the health liabilities until in the end there is little or no chance of full recovery, and that is how the proportion of the chronically ill snowballs. It is therefore no service to the aged to subsidize by taxation the very modern medicine that has chiefly created the problem.

Medical care for the aged begins before birth. The state of health in old age is the product of inherited predispositions, individual susceptibilities, and the kind of treatment applied in illness, over the course of the entire life. At conception certain factors are set, certain characteristics determined, an individual constitution initiated. If treatment from that moment on aids the vital force and strengthens the patient, old age is unencumbered by accumulated sickness. But if treatment suppresses, old age when it is reached follows the pattern of illness and liability to illness seen by the United States Public Health Service when it reports the high and mounting trend toward the chronic. This is not a matter of chance. It is rather a matter of knowledge, skill and intelligence.

In the entire field of medicine, Homœopathy alone views the patient in his entirety and connects his life in a rational sequence from beginning to end. This gives Homœopathy its unique opportunity to lift the well-being of the patient and render him, by reason of homœopathic treatment, better able to stay well. That principle appears in negative terms on the back cover of this issue, where it states that Homœopathy does not turn the diseases of youth into the diseases of old age. In positive terms, this means that under Homœopathy disease liabilities diminish and the race grows stronger. The health burden of the aged on the resources of society is not the heavier because of age. Acute and passing ills are not converted into the deep and chronic.

In the face of charitably intended subsidy for ordinary medicine in favour of the aged, perhaps it is in order to suggest enlightenment and education—post-graduate education of those in the profession capable of absorbing it; education of laymen on the principles involved; demand for rational and scientific medicine to supplant that which views the whole thing as a matter of chance.

—*The Layman Speaks, Oct., '60*