

Traditional vs nontraditional medicine

My shoulder left me recently.

For reasons yet undetermined, when I got out of my car, briefcase in my left hand, my shoulder apparently separated. It could have had something to do with the fact that I was thrown from an automobile going 70 miles an hour when I was a kid, but therein lies another tale. Whatever the genesis, the outcome was that I was in pain. I wasn't dying, and the problem did not affect my ability to practice, but there was significant discomfort when I turned over in bed. Since I practice for a living, I was not enamored with the prospect of having shoulder surgery and the time away from work for rehabilitation. So I decided to search for an effective, nonsurgical alternative and opted to hear from both ends of the medical spectrum. To accomplish this I called the physicians that normally treat my aches and pains. One is traditionally trained, one is not. In the past I have been under the care of both men, and I like and respect each one. Both are well qualified in their fields, and I have been their patient for years. It so happened that one appointment followed the other.

The only similarities during the respective appointments were that both men took a brief history and my blood pressure. From there it was two different worlds. The physician trained in traditional medicine (TM) did a physical examination, took blood and urine samples, and ordered radiographs. The physician trained in nontraditional medicine (NTM) walked in, looked at me sitting on his examination table and remarked, "It looks like you are having problems with your left shoulder." The recommendation from the TM physician was to have a consultation with a surgeon and in the meantime, to tape a tennis ball to my shoulder at night to remind me not to turn over on it. An hour later, I visited the NTM physician. He treated my shoulder using a variation of acupressure, and I left his office pain free. Since then I visited the specialist suggested by the TM physician and was told that I needed more films (an MRI) and that there was a good chance my rotator cuff (I must say this sounds like a part for my car) had been damaged. He indicated that the need for surgery was strong. While waiting for the appointment with the

TM specialist to come around, I have continued to see the NTM physician monthly and have continued to be pain free. The TM specialist was surprised at my range of motion and the lack of pain I had considering the nature of my old injury. I told him that this was not the case until I had started NTM therapy a number of years ago. He was somewhat surprised.

I use this example not to suggest that either man is right or wrong in his approach, but to point out how we all see what we understand and that extremes in either direction can sometimes not be in the patient's best interest. In my opinion, neither approach has all the answers and those who strictly adhere to one approach often have less than desirable outcomes. An extreme example is the 41-year-old gentleman who led our office yoga sessions. He died because of his strict adherence to NTM. He suffered a heart attack, collapsed, and was rushed to a hospital. When he awakened, he removed his IVs and walked out. A short time later he had a second myocardial infarction and died. In my opinion, the large number of angioplasties done without allowing selected patients an opportunity to reverse the problem using diet, meditation, and exercise is an extreme example of overreaction in the other direction (TM).

I am happy that NTM has allowed me to continue to practice, but I continue to seek advice from the TM specialist on what, if any, negative consequences not having surgery would be. I do this because I think that positive answers can be found to physical problems in both TM and NTM, and I seek to find the optimal fusion of each discipline. As health care professionals, we should, in my opinion, keep open minds to both sides of the discussion and use the best of both fields to benefit our patients. I think each approach has much to offer, and each can, and should, learn from the other.



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