

A Return to Healing: Radical Health Care Reform and the Future of Medicine

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Except for an occasional posturing ideology on the Fox News Channel, most people would agree that the U.S. healthcare system—far from being the best in the world—is seriously broken. Indeed, according to the authors of this engrossing book, it ranks overall 37th in the world. The manifold defects in the U.S. system are meticulously dissected by the authors, who arrive at a grand, though flawed, synthesis at the end.

Dr. Len Saputo, whom I met at the Orthomolecular Health Medicine Society, (www.ohmsociety.com), is a Duke University-trained internist in the San Francisco Bay Area. He begins his narrative with an arresting account of his wife's near-fatal anaphylaxis in a hotel room, followed by his epiphany when his search for understanding led him to Dr. Russell Jaffe. He then examines conventional medical training with the pitiless scrutiny of a geneticist checking fruit flies for mutants. He finds, indeed, a legion of defects: alienation, desensitization, depersonalization, humiliation, misdirected "scientific" objectivity, therapeutic chauvinism, and more. Much of what is wrong with mainstream allopathic doctors is firmly rooted in their training.

In subsequent chapters, Dr. Saputo deftly punctures "scientific" medicine's pretensions to being scientific; delineates the shortcomings of hospitals, HMOs, and the insurance industry; and questions Big Pharma's pervasive political influence, flawed (sometimes dishonest) research, and deceptive marketing.

Having earlier made the case that the medical profession is at war with nature, Dr. Saputo devotes three chapters to the new paradigm of wellness, prevention, and

healing; the birth of the health medicine movement (in which he was intimately involved); and the creation of an integrative medical clinic. Much of this will be familiar to readers of this Journal, though probably eye-opening to conventional physicians and their patients. With regard to services at an integrative clinic, I found particularly intriguing his description of Healing Circles, wherein practitioners cooperatively analyze a patient's health problems and discuss their management in the patient's presence. (Try bringing a group of allopathic specialists together to cooperate in healing your problem patient!)

Among my few criticisms of this book are its scanty index and the authors' evident disdain of free markets (a term missing from the index, by the way). In one place, they list Medicare's reduction of physicians' fees as one of the "sad consequences" of market-driven health care, instead of the predictable result of governmental control. Elsewhere, they assert that free markets are relatively inefficient at providing best-evidenced health care and medical choice (both of which are quintessentially free market activities!). They deprecate "the untrammled worship of free markets" (using "worship", one assumes, to connote irrational faith) while seeming not to understand the definition of free market, which is simply one in which prices for goods and services are set by mutual agreement of seller and buyer, without governmental interference except for interdiction of fraud and coercion. Thanks to multifarious governmental intrusions (*vide infra*), a free market in health care has not existed in America for years. Perhaps it should be seriously given a try before being dismissed out of hand.

The concluding chapter, titled "The Imperative of Radical Health Care Reform", fails to satisfy. That is not to say that it entirely lacks merit. Indeed, many of Dr. Saputo's recommendations are eminently practical and could be implemented now if the political situation permitted: radically reforming the FDA, making exercise universally available, taxing junk food, banning

direct-to-consumer drug ads, supporting widespread preventive screening, and funding comparative assessment-of-therapies research, for instance.

The problem is that Dr. Saputo also supports a government-run, single-payer system for health care. That is a collectivist solution. The reader is somehow supposed to suspend disbelief that the government, whose ever-compounding missteps are abundantly documented throughout this book, can actually get it right this time. This, mind you, is the same government that fostered health insurance in the first place, irrationally linking it to employment, and then monopolized elder care; foisted HMOs, PPOs, and managed care on doctors and the public; fixed physicians' fees; and topped it all off with an extravagant, unfunded prescription drug scheme. Sure, they can get it right. And pigs will fly, rainbows will dance in the midnight sky, and unicorns will graze among my rose bushes.

That final chapter is framed by a statement from the economist Paul Krugman, who is quoted at greater length further into the chapter. Among other things, Krugman claims that the big advantage of universal, government-run health insurance is lower costs—hard to fathom, since the interposition of a middle-man into the doctor-patient transaction necessarily diverts resources away from care (the core economic problem with any insurance scheme), and moreover, bureaucracies are by nature universally expansive. This reviewer deplores Saputo's choice of sources. Krugman is one of the more pervasive (and partisan) purveyors of collectivist twaddle. A Nobel laureate, to be sure; but a more suitable one to have quoted might have been Friedrich Hayek, whose *The Road to Serfdom* maps out where the internal logic of collectivism inexorably leads.

By contrast, health medicine, with its emphasis on biochemical individuality and the whole human being, is inherently non-collectivist, individualistic, antithetical to the depersonalized, statistically-based, one-size-fits-all medical model under which doctors and patients suffer in common. (But a uni-

versal legal entitlement does fit that model, while providing little or no motivation for self-care.)

Dr. Saputo does point to examples of functioning single-payer systems. One is the Canadian system, the infelicitous inclusion of which may reflect the author's unfamiliarity with its shortcomings. Another is the French, which really does seem to work well according to first-hand accounts I have received. But then, the French can afford it: They have no far-flung military establishments across the globe, are not fighting wars on two fronts, and do not struggle to maintain hegemony over the rest of the world.

As Ralph Bourne famously (and cynically) said, "War is the health of the State." By the State he did not mean the will of the people, democratically expressed, but the apparatus for coercing unquestioned obedience from individuals and groups. But the true health of a nation springs from the health, vigour and freedom of its people. Loosening the tentacle-grip of imperialist ambition and renouncing bellicosity must be part of the cultural and social healing necessary to reforming health care.

Dr. Saputo briefly discusses the need for a sea change in our cultural expectations but does not, in my opinion, develop the theme sufficiently. For one thing, his exposition could benefit from a critique of factory farming and food hucksterism, as in the recent documentary film exposé *Food, Inc.* Moreover, too much remains unsaid about cultivating respect for one's own person: self-reliance, self-care, self-esteem, self-control, and the key one, self-ownership (the *bête noire* of the national War on Drugs).

In the light of developments after the publication of this book, it is clear that the hoped-for radical health-care reform has mutated into something dysmorphic. As Dr. Saputo remarked in a personal note to me, the bill that the Obama administration rammed through Congress "is an economic stimulus package designed to not only maintain the status quo but also make it worse—overall the insurance companies and Big Pharma won out—big surprise!" At least, the bugaboo of

“socialized medicine” is now vanquished. The American President is finally unmasked not as a socialist but a corporatist, which ought to concern us more, since the distance between corporatism and yesteryear’s National Socialism is not great.

One might be tempted to conclude, upon reaching the last chapter after all the carefully documented material preceding it, and knowing what happened after publication, that a mountain of labour has brought forth a mere mouse. But it seems to me that the book simply isn’t quite finished, and it needs a tenth chapter to present a satisfactory solution.

What might that be? I submit that the answer is hinted-at in Dr. Saputo’s suggestion that a Constitutional amendment be passed to ensure medical freedom, so that patients have full freedom of choice of practitioners and modalities. It seems unlikely that such an amendment would actually pass, given the complexity of the procedure; however an equivalent outcome might be achieved via government-issued medical scrips, or health-care vouchers, dispensed in relation to an individual’s statistical probability of illness based on census data. The patients would pay doctors and other practitioners directly with the scrip, in true free-market fashion; government could not control that.

I presented such an idea last year in person to a Congressional leader of the liberty movement, with no discernible result. A medical colleague of mine, who knows the Speaker of the House personally, sent his own take on medical vouchers to her but received no acknowledgment. Still, according to Dartmouth economist Jon Skinner (personal communication), the voucher idea has been circulating for a while and might yet gain some traction. One version of it is the Guaranteed Healthcare Access Plan, mentioned by Saputo, but that particular scheme retains the costly middleman, the insurance company. One of the most thorough expositions of the voucher concept is a 2005 article by Dr. Ezekiel Emanuel and Victor Fuchs, available online at www.WashingtonMonthly.com/features/2005/0506.emanuel.html.

To summarize: *A Return to Healing* is a detailed, documented, frequently engrossing elucidation of the flaws and failings of the U.S. healthcare system, with a glimpse of a possible bright future for health care and healing. The story is incomplete, because the author’s hoped-for political solution to radical reform has not materialized. One hopes that an informed and freshly energized populace might ultimately craft the last chapter; if they do, they will have Len Saputo and other medical visionaries to thank for leading them so far down the right road.

—Richard P. Huemer, MD