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▼ **Evidence based medicine in favour of biomedicine and it seems that holistic medicine has been forgotten?**

Søren Ventegodt, Trine Flensburg-Madsen and Joav Merrick (11 November 2004)

Evidence based medicine in favour of biomedicine and it seems that holistic medicine has been forgotten?

11 November 2004



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[Re: Evidence based medicine in favor of biomedicine and it seems that holistic medicine has been forgotten?](#)

EDITOR---This communication in response to the recent editorial on evidence based medicine (EBM) by Straus and Jones (1).

The present day state of the art of design, the double blind clinical trial, is in our opinion not the best methodological choice for evidence based medicine. Since Hippocrates it has been known that the curve of healing is a square curve, where the baseline of health, quality of life and ability is lifted to a new level during treatment (see figure in reference 2). If the curve is not square, the patient is not healed. It is fairly easy to take this fundamental insight in the healing of the patient into practical methodology, as we have done with the "square curve paradigm" (2) using the short questionnaires QOL1 (3,4) QOL5 (3,4) and WHOQOL (5).

The beauty of this approach is that all branches of medicine can use the method to produce results. If there is a clinically significant effect it can be demonstrated with only 20 patients, which makes this method extremely fast and cheap. We have used this method to test the effect of alternative medicine on chronic whiplash associated disorder (chronic WAD) and found that the alternative treatment did not help the patients (5). The cost of that whole study was over 100.000 USD, because we also made a traditional randomisation and used a control group in order to adapt to international standards. The cost could have been reduced to a small fraction, if the square curve was generally accepted. To put it simply, only the pharmaceutical companies can afford the traditional kind of design, which leaves complementary and alternative medicine behind due to the cost involved.

Additionally, the clinical double-blind trial is actually full of bias (6)

making the "proved" effects less than completely proved. We therefore suggest to return to the simple way of documenting medicine: If the treatment is directly based on comprehensible scientific theory and the trial or treatment provide significant improvements in either QOL (Quality of Life), health or ability when tested on 20 patients, we believe it is good evidence based medicine. If a treatment works without a good theory, it is still likely that we have a good physician, who can cause the treatment to work, but the effect can hardly be reproduced, because the treatment cannot be understood. This can still be labelled as good medical artwork, which is good for the patient - but not good enough for a scientific medical society.

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