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▼ **Healthy rational medicine**

Søren Ventegodt, Michal Hemmo-Lotem, and Joav Merrick (10 May 2005)

Healthy rational medicine

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medicine](#)

EDITOR---It was interesting to read that only 3% of Americans follow the health advice of not smoking, maintaining normal weight, eating fruit and vegetables and making exercise (1).

There are two fundamental demands that we have for good medicine: it must be effective and it must be understandable. While everybody seems to agree on the need for efficient medicine – evidence based medicine – many physicians and patients today accept that much medicine is not build on sound scientific hypothesis. Just think of the lack of theoretical rationale for using NCE (New Chemical Entity) for depression in psychiatry, if you need one example.

In surgery most things are evident and rational. This problem arise, when the medicine is for subjective problems, which unfortunately is the majority of health problems that patients present with, because these are still so poorly understood theoretically. The reason for this lack of understanding is the almost complete lack of scientific understanding of consciousness, feelings, emotions, sexual urges and what is called "qualia" in neurology, the raw substrates of subjectivity in the brain. To bridge biology and consciousness have for decades been called "the hard problem" and this problem seem to get harder and harder, the more chemical our understanding of biology turns.

Even though medicine is about improving feelings and states of consciousness – dimensions like experience, attitude, pain, mood, expectancy, satisfaction etc. - most of the cures of modern biomedicine lack good theory. The problem with building evidence based medical science on theoretically unsatisfactory cures is that instead of testing to which degree a rationale is realised, the test becomes a pure test of symptom removal, which normally are only temporary as the cause of the problem has not been solved. Very

often the intention behind the study is to market a product, so statistical significance becomes much more important than clinical significance – that the drug or cure actually help a major fraction of the patient.

The unhappy result of this practice is that we have drugs and cures with little rationale and little effect (only temporary effect and a high NNT number (Number Needed to Treat)).

Let us therefore stress, that we need for the future good medicine that is both evidence based and theoretically sound. We need a natural science that can be used for a conscious-focused medicine based on holistic biology able to explain emotions and consciousness. We also need clinical tests that focus on healing, not only removal of symptoms (2).

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