

# The New York Times Magazine

December 8, 2002

## The Lives We Live: The Healing Paradox

By Abraham Verghese, MD

As a practicing physician, I confess that I learn about the latest medical breakthroughs while reading my morning paper. When my office mail eventually brings me the original study, my pleasure in the journal's pristine cover and untouched pages has been diminished because the tidings arrived before the messenger. But here is why I cannot complain: the science reported in my newspaper is genuinely newsworthy, deserving its place alongside matters of state and economy. For example, two weeks ago we learned of a promising approach to the prevention of cervical cancer -- a vaccine against one type of papilloma virus that is an antecedent to this malignancy. Imagine that. A vaccine for cancer! On the same day as that announcement came the first report of a vaccine that might prevent genital herpes. And then there's the ongoing news of the unraveling of the human genome in all its amazing complexity. History will draw a line here: Before Genome and After Genome. The Rosetta stone has been found and applied to the sacred scroll, and it promises important breakfast reading for years to come.

But my morning paper, laden with science, also carries evidence of our distrust of science and our search for another kind of healing. You've seen it: a full-page advertisement for a product that you know is too good to be true. The text has large type, a before-and-after picture, no listing of the contents of the product and a blizzard of endorsements from "scientists" and "patients" that take the place of data. These products are life extenders, fat fighters, growth-hormone releasers, relievers of limb pains, rebuilders of muscle and bone and sometimes all of the above together. I think of them as quark drugs, phantoms that if they could be studied in careful trials would

soon lose the "r" for a "c" and be revealed for what they are.

But the market for such remedies is huge. Indeed, estimates are that nearly half of all adult Americans use some sort of dietary supplement, and the sales of these products in 2000 amounted to more than \$15 billion! I plead guilty: echinacea and ginkgo have made appearances in my medicine cabinet, as I reached for magic for some ailment or other. I had no guidance, no data of the sort a scientist should accept, no package insert. I tried them on faith. Alas, they did nothing.

The good news is that many such treatments are being systematically and carefully studied through the aegis of the National Institutes of Health; what we know thus far is that few products live up to their claims, many have the potential for toxicity and the quality control on this stuff is awful. Here is the bad news: 70 percent of us would take these products anyway, even if they were shown to be no better than snake oil. Even as science measurably changes our life and extends our life spans, as a society we are suspicious of science.

I am not a crusader against alternative medicines or its practitioners. I am all for things that make us feel better and that don't hurt us. But I do wonder at the paradox of even the most rational of us being drawn to these bottles with pictures of ugly tubers and weedlike plants on them. Why do we become dreamy-eyed hearing the songs of the New Age pied pipers whose melodies interweave quantum physics and the workings of the colon in beautiful but completely fictional ways? Like revivalist preachers, they invite our faith, our willingness to search for magic in ancient, undecipherable Oriental practices (as

opposed to the new, quite decipherable, Western practices). In return they offer nostrums, tonics, tapes, books, diets, retreats, mantras, votive candles and cruises; they bring color, fragrance and incense to an illness experience that otherwise plays out in black and white.

In this golden age of science, disease and treatment have become demystified. If you went to a doctor clutching your stomach in days of old, the doctor, after a good bit of probing and hemming and hawing, would retreat to the dispensary and with great ceremony compound a *mistura carminativa*, vividly colored in a medicinal bottle. Short of surgery or an autopsy, no one would be precisely certain what you had. But come clutching your stomach to a medical doctor these days, and after a careful history and exam, the doctor can "see" your gallbladder, measure the distress of your pancreas, examine the lining of your colon and much, much more if need be and then institute the precise cure.

Therein lies the rub: we are perhaps in search of something more than a cure -- call it healing. If you were robbed one day, and if by the next day the robber was caught and all your goods returned to you, you would

only feel partly restored; you would be "cured" but not "healed"; your sense of psychic violation would remain. Similarly with illness, a cure is good, but we want the healing as well, we want the magic that good physicians provide with their personality, their empathy and their reassurance. Perhaps these were qualities that existed in abundance in the pre-penicillin days when there was little else to do. But in these days of gene therapy, increasing specialization, managed care and major time constraints, there is a tendency to focus on the illness, the cure, the magic of saving a life.

Science needs to be more cognizant of the other magic, the healing if you will, even as we reach for the proven cures. We need to develop and refine that magic of the physician-patient relationship that complements the precise pharmacologic interventions we may prescribe; we need to ensure the wholeness of our encounter with patients; we need to not lose sight of the word "caring" in our care of the patient. And doggedly, in this fashion, one patient at a time, we can restore faith in the fantastic advances of science we are privileged to witness.

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