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Politics, Propaganda and the Press, Part II

By Tonda Bian

Editor's note: This is the final part in Tonda Bian's two-part series. Part I was in the March 22 issue.

Tonda Bian is the author of *The Drug Lords: America's Pharmaceutical Cartel*, an exposé on the lack of marketing ethics in the pharmaceutical industry and medicine's attempt to keep nonmedical care noncompetitive. The book and Ms. Bian are available through No Barriers Publishing, 1201. S. Westnedge Av., Kalamazoo, MI. 800 828-3057.

The National Mental Health Association (NMHA) and Eli Lilly have had a long-term Prozac-promoting relationship under the guise of public service. In Janine Pouliot's article, "If Your Child Is Sad -- Take It Seriously" (*Sunday's Parade*, Sept. 27, 1998), the approach is brief and direct. The goal: to outline the warning signs of childhood depression and direct parents to call an 800 number. Drug therapy is the focus of the article (Prozac and Zolon). The emotional pitch of the article is clear: "Untreated kids are at risk not just for depression itself, but also for falling off the moving train that carries their peers forward." What responsible parent would allow this to happen?

Within the article, we see Nicholas Dubuque, a 14 year old who was diagnosed and labeled as depressed at age 10, and who is now leading a "healthy" life thanks to ... Prozac!

No mention is made in the article of other types of treatment for young Nicholas. No mention is made of examining the child's diet and possible effects that sugars and food additives might be playing in the depression.

The clincher for this NMHA-incited promotion is the advertisement that follows two pages later: the "coincidental" two-page Prozac ad. This example is not an isolated one. It's a practice that flies in the face

of objective editorial content that editors and publishers strive to maintain. Magazines like *Parade* are ad-heavy in the drug category. If a reader wants objectivity in editorial content, it is not going to be found there.

The close relationship between the press and medicine has been a long-growing trend of two types: 1) editorial content slanted to please advertisers; 2) editorial not necessarily slanted to their advertisers, but based on the assumption that the medical profession is selfless and altruistic; that what comes from the mouth of medicine is for the common good and therefore must be correct.

The collaboration of both advertising revenue loyalty and naiveté is why the media often report what medicine feeds them via news releases word-for-word with little scrutiny or objective analysis. Take, for example, the video news release (VNR). A drug company provides a video production that the news program only needs to add a lead-in and a wrap-up audio. However, the most frequent word-for-word example is the "promising new drug" report in which the reporter will tell the story of a drug (still in the testing stage or about to be released) to create a pre-release demand, which may help expedite the FDA approval process.

The obvious downside to this biased news reporting is that it perpetuates the myth that drugs heal, that the ultimate hope for poor health for any kind of ailment is found in the latest, greatest, perfect drug, rather than in avenues that promote genuine health and healing, i.e., lifestyle or in alternative avenues of health care.

So what is the point of an article focusing on the politics, propaganda and the press when all three in concert all but ensure medicine's place as the only credible "game in town" and the only avenue for better health for the sick and dying? What real hope is there for a more equitable playing field for complementary care?

There is hope and it is found in those who practice complementary care: chiropractors, homeopaths, naturopaths and others who have front line contact with the public and have the power to help influence policy, attitude and practice through their efforts with the government and the press. Yet, somehow, many who have this front-line contact neglect opportunities for change due to attitudes of helplessness and simply being overwhelmed with day-to-day obligations. But becoming active in one of the following actions can make a difference and help mold a successful evolution toward a more equitable health care playing field.

1. **Support Political Action** -- National complementary care associations, such as the American Chiropractic Association, ask for DC support when fighting issues on a national scale. A recent

example is the ACA's plea for support fighting the Health Care Financing Administration's (HCFA) Medicare regulations that have PTs and MDs doing adjustments and squeezing out chiropractic. More than a few practitioners contributing are needed to change or even maintain policy. Consider a minimum or an "as much as possible" contribution to these campaigns. Don't let the request get lost on your desk. Also, staging your own campaign by contacting your regional and state representatives on vital issues to voice your positions is a powerful step in the right direction. The result is to everyone's benefit and future.

2. **Rebuttal Against Propaganda** -- For too long, complementary care practitioners have walked on eggs to maintain a better relationship with the community and attempt to avoid offending or alienating patients. Too much time has been wasted defending what alternate care is in response to a public ignorant, but in desperate need of information of nonmedical health care choices. This defensive behavior hasn't gained ground. The answer lies in going on the offensive. DCs need to present, both verbally and in their practice literature, comparisons between the safety and success of complementary care vs. medical care. Through discussions with patients and through newsletters, chiropractors and others in nonmedical care need to bring to light information such as a study presented in the *Journal of the American Medical Association* (April 15, 1998). That study noted that adverse reactions to legal drugs in hospitals alone rank between the 4th and 6th-leading cause of death in the U.S. today. And when extrapolated to include all death due to legal drugs period, and not just those caused in hospitals, legal drugs can be projected as the leading cause of death in this country.

There is no formal system nor is there a mandatory requirement for doctors and hospitals to report adverse reactions to legal drugs. Why? The answer is simple. Medicine has a vested interest in the public not knowing the dangers legal drug use holds.

It's a sound fact that medicine has long practiced negative propaganda in their war with complementary care. A most recent example is the attack on chiropractic care as being no more beneficial than a \$1 pamphlet explaining the benefits of chiropractic. The important difference when complementary care points out the shortcoming of medicine is that the proof is in the statistics medicine itself provides (as opposed to studies on complementary care effectiveness which are usually skewed to support the desired negative outcome and conducted by medical interests). Use the facts, particularly the fact that legal drugs are one of the leading causes of death in this country. Talk about it; write about it; juxtapose medical studies to those of complementary care in terms of the effectiveness of each. Ask your patients to consider this: If

chiropractic treatments are only as valuable as a \$1 pamphlet explaining chiropractic, why does medicine, through efforts such as HCFA, want to gain control of chiropractic's work?

1. **Challenge the Press** -- The media is guilty of reporting virtually all medical reports and news releases as if they were gospel: "Ritalin Vital Is Tackling ADD/ADHD"; "Estrogen Use Aids Parkinson's Disease"; "Medicine Says Safe Kids Are Vaccinated Kids"; and thousands of other headlines that appear daily in the media provide one-sided information. When you read or hear these, contact that media, write a letter to the editor and urge more objective reporting. Letting medicine get away with propaganda against complementary care as and propaganda supporting their own interests eats gradually away at the inroads complementary care has made. Put a foot in the door to prevent medicine from completely closing the door on complementary care.

The propaganda, politics and press we find ourselves a victim of can always be altered and even set in a new direction by our own actions and reactions, both individual and collective. Each doctor should make it a goal to play a part in winning ground. Each practitioner making one effort a month can change the public's perception of health care. Chiropractors and other complementary care practitioners need to remember that David slew Goliath and that smart is often mightier than size.



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