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Opinion

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COVID-19 and Holistic Medicine

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Opinion

The COVID-19 mortality statistics are quite chilling. 300,000 have died in the USA, in Brazil 190,000, 120,000 in Mexico and India 146,000, while France, UK and Italy are each approaching 70,000 [1]. And yet each of these deaths is the end of life of a real person who leaves a well of grief for the family and friends they have left behind, a point to which medicine now seems quite indifferent.

What was apparent at the start of this pandemic in March 2020 and that seemed to stand out as really new and unusual was the way that physicians disclosed details about the patients who have become infected. This did not happen previously for SARS or Ebola, about which no such information was ever revealed, and nor does it happen routinely for cancer or pneumonia. Most diseases reported by mainstream medicine are conceived of entirely as 'generic entities' simply floating around in society like ghosts that could attack any one of us quite randomly at any time, just as if we are all equally susceptible. Only in recent years has it become fashionable for clinicians to explore certain lifestyle factors such as alcohol consumption, smoking, diet and exercise as 'predisposing factors' to certain conditions such as heart and lung diseases, some cancers, obesity and diabetes.

In the first wave of the pandemic, physicians were at pains to identify and state publicly that the people who have had COVID-19 have tended to fall into certain categories, such as being older (aged 50+), diabetic, obese, ethnic black or brown, having heart problems, high blood pressure, asthma, chronic lung disease and undisclosed 'underlying health problems.' Clinicians seemed quite keen to identify these 'predisposing factors' as important ancillary aspects about the people who have had COVID-19, and especially those who have had the most severe forms of the disease and/or

who have died from it. Such 'risk factors' helped to identify those 'high risk' people in society who merit much greater protection and shielding from COVID-19 compared to those who are not in any of those categories. Back in the Spring physicians made a point of identifying such factors and marking them out for public attention in a way that has not occurred before.

It may seem on the face of it quite unremarkable that such patterns have been identified in the types of patients who have succumbed to the worst forms of COVID-19, but such a therapeutic approach is much more the 'bread and butter' of the practitioners of holistic therapies, most of whom obviously take a broadly more holistic and multi-faceted view of health and sickness than mainstream physicians. It is therefore worth asking why physicians have suddenly and unexpectedly undertaken to identify and publicize so widely these underlying patterns for COVID-19 and yet to have not done so previously for bird flu, swine flu, SARS, influenza or Ebola. What has precipitated this sudden affection for a more holistic approach to an epidemic disease? Is it a welcome sign of greater holism in medicine? Or is it just a one-off event?

More recently, since about July, these ancillary health factors have been largely ignored by mainstream physicians and they have stopped mentioning them. They seem to have returned to their default position of describing the disease as an 'entity' and the deaths just as people who succumbed to it. There seems to be no further interest in exploring why certain people have succumbed or what it was about them—their lifestyle, diet, exercise, health, ethnicity, age, medication, etc—that might have led to their demise.

Why is mainstream medicine no longer interested in exploring these aspects? The reason would seem to be that they are focused



solely on the so-called causative factor, the virus, and on finding ways to reduce its transmission in the population. They are manifestly not interested in why certain people are disposed by their lifestyle and underlying health issues to succumb to this virus. And yet that is probably the most fruitful line of enquiry from a holistic medicine perspective. Is not prevention better than cure?

Taken together, all these events illustrate the usual and longstanding indifference mainstream medicine has shown towards the existence, relevance and importance of these background factors in disease, and the individuality of sickness symptoms and susceptibility. Mainstream medicine has for centuries been deaf and blind to the many subtle underlying factors in disease. It has focused itself exclusively on classifying a condition and then treating it as a 'generic entity,' potentially affecting all people equally, when all along the reality is that disease is an individual phenomenon, not a generic entity, and that these background factors are an integral part of the condition and critically important not only in identifying who will succumb to a particular condition—the high risk groups—but also in how it may manifest and develop in the largely unpredictable idiosyncrasy of each individual. They focus all their attention, energy and therapeutic 'ammunition' on the pathogen rather than on the patient. Remove the pathogen is the primary dictum, rather than exploring and restoring the underlying health and lifestyle of the individual.

Moreover, these points illustrate the claims of holistic practitioners that sickness is by its very nature an entirely individual, multi-faceted and idiosyncratic phenomenon and that disease classification and so-called diagnosis are entirely arbitrary and unnatural human constructs imposed upon nature—made rather than found—instead of being the product of genuine empirical observations about the nature of disease as it exists in reality.

All along they have claimed to be following the science but is that such a wise strategy? The big problem with science is that it simplifies, it reduces real, natural and complex things into simplified models and mechanisms. So often these models prove to be inadequate such as with the use of pesticides and the burning of fossil fuels, or the disposal of wastes like plastics. A scientific advance so often turns out to be an unforeseen backward step.

By breaking things down into smaller units, it is this analytical approach of science that spawns simple and fragmented models and mechanisms that only vaguely approximate to the actual reality they are designed to depict. By omitting the true complexity from their analysis, the models end up having at best only a partial correspondence with reality resulting too often in negative consequences when they are applied in nature. Such negative consequences can be seen in health science, medicine, ecology and pollution to name just a few.

This approach is founded it seems on a vision of the world that only sees parts and remains blind to the complexity of

interconnected wholes. That is why the holistic therapies score so high: they are in tune with the interwoven reality—the warp and weft—of the organism's structure and functioning. The same applies in ecology, where deep ignorance of the interconnectedness of living organisms in the ecosystem has allowed such widespread plastic pollution, pesticides in food, antibiotic and growth hormone traces in milk and meat and female hormones in our rivers and streams. And sadly, this fragmented view of life is also coupled with, and driven by, commercial gain and industrialisation on a vast and seemingly unstoppable scale.

In healthcare, surely without a deeper appreciation of lifestyle and other idiosyncratic factors, treatments will continue to be suppressive and uncreative and only lead to more sickness in the longer run. Crude drugs and vaccines do exactly that and have only conjured up an illusion of medical progress.

For example, it seems highly likely that closeness to nature helps us to fend off sickness and to be strongly resistant to pathogens, because our system has been exposed to them so many times from birth; in some respects, the COVID-19 pandemic can be better understood in relation to our disconnection from wild nature and thus our weakened defense mechanisms. The soil is a complex soup of pathogens but lo, those closest to it are so often the healthiest!

Allopathy involves the use of drugs, in strong doses and their application for all and every sickness local or otherwise. As Hahnemann discovered for himself it is merely a system of suppression of symptoms. It generalizes any sickness into a classifiable entity that can affect anyone. It is thus fundamentally unnatural; it is unnatural because it imposes human constructs upon groups of symptoms and gives them a reality, they don't in fact possess. And instead of restoring the fuller health of the person, they merely attack the symptoms and the so-called pathogens.

Suppression is the use of crude drugs to alleviate symptoms based on clinical trials and contraries, and named diseases and on so-called local conditions rather than using minute doses of drugs and similar, or on the many other natural therapeutic measures, including lifestyle adjustments, which aim to improve the patient as a totality. Suppression is also based on generalizing rather than being cognizant of individualizing idiosyncrasy. And allopathy today seems to be engaged in all-out suppression from paracetamol, inhalers, antibiotics, vaccinations, pain killers, antidepressants, antihistamines; you name it, that is all they have on offer.

The individual susceptibility in sickness is important, not just in COVID-19, but also the rampant sickness in the 19th century—the role of urban poverty such as in cholera, typhoid, tuberculosis, the importance of individuality, overcrowding and poor diet in diseases—all such dimensions of sickness are now systematically ignored. The only dictum seems to be to find the so-called pathogen and to destroy it, which of course is ultimately an impossible task: we share the planet with myriad bacteria and viruses and mainstream medicine might be better advised to change course and

begin to explore how we might live in harmony with them rather than waging a futile and unwinnable war against nature.

Acknowledgement

This is a revised, updated and extended version of some parts of an article that first appeared in the journal of the Australian Homeopathic Association in December 2020 [2].

Conflict of Interest

Author declares no conflict interest.

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1. This data is from Johns Hopkins University daily coronavirus update (live).
2. P Morrell (2020) Stork Hahnemann and Covid-19. Similia 33(2): 8-11.