

# 10 epic medical fails you may have fallen for (part two)



This week, I'll be concluding my list of Epic Medical Fails, and I want to start you off with a link to some "supplemental material." Fellow Boomer Jeff Schwartz read my article and provided me with this very appropriate 1970s/80s cultural reference from *Saturday Night Live*—now THAT was a cast, and they sure had great writers back then! Take a look at Steve Martin as Theodoric of York, Medieval Barber.

That makes the rest of this list seem positively benign! Now, let's take a look at the second half of our Epic Medical Fails.



## **6) Taking common painkillers after you've had a heart attack.**

After a heart attack, many patients are placed on blood thinners like aspirin and Plavix, especially if they've received stents. But use of non-steroidal anti-inflammatory drugs (NSAIDs) like Advil, Motrin, and Aleve, even for as short a period as a few days, can dramatically increase the risk of serious bleeding. NSAID users were also more likely to suffer heart attacks or strokes. This is particularly disconcerting because of the prevalence of aches and pains in mostly older heart patients, and easy access to over-the-

counter pain meds which are often taken indiscriminately without their doctors' knowledge or approval.

**7) Lifetime antacids for "hiatal hernia."** When I ask some of my new patients why they're permanently taking acid blockers like Nexium, Prevacid, or Protonix, I often get this response: "Oh, I had heartburn so the doctor scoped me. She told me I had a hiatal hernia so I need to take medicine to keep the acidity down. Forever. Can't be helped unless I want an operation to fix it." There's something that smacks of inevitability about that. It's like your stomach is permanently deformed and caustic acid will invariably leak through the hernia and burn your esophagus. But hiatal hernia is extremely common; approximately 60% of individuals aged 50 or older have a hiatal hernia! Its incidence is dramatically increased by obesity. My experience convinces me that the vast majority of patients with "hiatal hernia" have their heartburn symptoms relieved with our GERD Diet, simple lifestyle changes, and the right supplements like DGL, probiotics and Endefen.

Why court the risks of long term acid blocker use like magnesium and B12 deficiency, irritable bowel syndrome, C. difficile diarrhea, osteoporosis and pneumonia when most of the time you can safely taper off the meds regardless of whether you've been told you have a hiatal hernia?

**8) Antibiotics for bronchitis, ear infections, sinusitis.** Pretty much everyone these days recognizes that if you have a cold or the flu, forget antibiotics – they're caused by viruses, and antibiotics only fight bacterial infections. The way we learned it in med school is that if the mucus is clear, antibiotics won't help, but if the mucus is discolored, it's said to be a bacterial infection, suitable for an antibiotic Rx. When a runny nose turns from clear to yellow, that's sinusitis. Z-pak! When a simple cough transforms into hacking up dark mucus, that's bronchitis. Levaquin! When a pediatrician looks into a child's ear and sees gunk, that's a

bacterial ear infection. Amoxicillin!

But new studies show limited benefits of antibiotics for most uncomplicated minor respiratory infections, even those once labeled bacterial. Sure, there are instances where one of these infections can turn nasty and require drug treatment. Doctors know this, but sometimes err on the side of caution out of liability concerns or simply to mollify their patients. But antibiotics have serious negative consequences, including disruption of the intestinal microbiome, immune suppression, allergy promotion, not to mention cultivation of antibiotic resistance. At the Hoffman Center we urge our patients to check with us before taking an antibiotic to see whether there are preferable, natural alternatives.

**9) Unnecessary heart stents.** Angioplasty with stent placement has revolutionized our treatment of heart attacks and serious cardiac problems. These tiny devices prop open narrowed arteries and normalize blood flow to oxygen-starved heart muscle. So it stands to reason that, even when a patient has no symptoms, stenting a partially blocked artery will help avert heart attacks and save lives. Only it doesn't, according to studies. It's estimated that half of the 700,000 stents performed annually in the U.S. are unnecessary. The procedures are not innocuous; they can result in heart attack, stroke or death, and all too often the stents close up (restenose) within a couple of years, necessitating re-stenting. Additionally, patients who receive stents must take blood thinners for life. Ignoring medical evidence, doctors still perform "preventive" stents on asymptomatic patients, but shun less invasive measures such as chelation and targeted supplementation.

**10) "Routine" antibiotics for heart murmurs.** Tens of millions of people received hundreds of millions of unnecessary "prophylactic" doses of antibiotics just because they had otherwise innocent heart murmurs. It was thought, until recently, that a common condition called mitral valve prolapse

(MVP) predisposed patients to a rare, bacterial infection of the heart valves called endocarditis whenever a patient had a dental cleaning or minor dental procedure. Dentists would simply ask the patient if they had a murmur, and write a prescription then and there. Now it's been revealed that only the most severe forms of MVP run the risk of causing endocarditis. The blanket requirement for antibiotics was only officially dropped in 2006. But some patients, especially those with surgical implants, still require antibiotics before dental, minor surgical and diagnostic procedures, or delivery, according to established guidelines. If in doubt, consult your doctor before your dentist automatically gives you antibiotics "just in case".

I hope these last two weeks have been eye-opening and enlightening for you. The ever-changing world of healthcare can be confusing—be a savvy medical consumer, and recognize pitfalls like these! As always, I encourage you to share this article with your friends, so they can avoid these medical fails as well!