

The five health battles we need to fight next



In a previous newsletter, I celebrated five victories that suggest the tide is finally turning—marketers of chemical-laden junk food are bowing to consumer demands, and even the Federal government is scaling back on its fluoridation mandates.

These victories are significant, and they show what happens when informed consumers vote with their dollars.

But, these are only superficial changes. We need to fundamentally overhaul our approach to disease prevention and treatment. Here are my suggestions on how we might do that.

1) GMO labeling. The controversy over whether we should label genetically-modified organisms (GMOs) transcends the relative merits or hazards of these novel agricultural products—which can be endlessly debated. It goes to the very heart of the question, “Do we have a right to know what’s going into our bodies?”

I say we do. And this extends to the government-condoned chicanery wherein hydrogenated fats can be concealed in foods because they’re below a certain threshold, where weasel-words like “natural flavoring” hide the presence of MSG and other horrors, and covertly-added addictive chemicals formulated by food scientists get us hooked on junk foods.

The cynical calculus of those opposed to GMO labeling is that we “can’t handle the truth.” I say, don’t ban GMOs outright. Instead, allow them to compete fairly in the marketplace alongside more natural alternatives, but with full disclosure of their ingredients.

2) Subsidizing health, not illness. Many Americans are “too big to fail”—literally. Ordinarily, this is language applied to bloated financial institutions under no pressure to give up their profligate ways because of perverse incentives. But obese, unhealthy citizens, like big banks, are not subject to the “moral hazard” that might check their out-of-control behaviors.

I’m not arguing for an uncompassionate society that leaves its sick poor, often through no fault of their own, at the brink of bankruptcy due to medical bills, or subject to sub-standard care.

But a system that underwrites food stamps for sugary, calorie-laden junk; that discourages people from setting up health savings accounts that could be applied to natural health care, supplements, or exercise programs; that rewards illness with indiscriminate disability benefits, and taxes self-

sufficiency; and that offers massive agricultural subsidies to growers of corn and sugar beets to keep prices artificially low fosters ill health on a national scale.

If we're seriously considering generous carbon credits for non-polluting industries, why not comparably incentivize health? Although "inequitable," insurance premiums based on prior claims apply rational market pressures to the profligate, just like auto insurance companies penalize careless drivers. While health is not entirely a merit system (think cancer!), surely actuaries could come up with a non-prejudicial formula to balance compassion with rewards for healthy behaviors.

3) A Marshall Plan examining true causes of disease. In 1945, much of Europe, Allied and Axis countries alike, lay in ruins. Our government wisely decided to invest in reconstruction of the shattered economies. The result was an unparalleled economic boom, and a peaceful reconciliation of the warring countries.

Here in the U.S., we are faced with a comparable disaster when it comes to our health care system. Many chronic conditions are poorly handled by conventional medicine; and even to the extent they are treatable, medical costs are so astronomical that they threaten to sink our economy.

Our current industrial and scientific systems favor the development of costly, patentable drugs that focus in a laserlike fashion on pathogens or aberrant disease pathways. While remarkable breakthroughs are sometimes achieved, they come at great material cost with an array of (often unforeseen) side effects. A classic example is the current drive to popularize surgical "fixes" for obesity via risky gastric bypass when lifestyle measures, if applied concertedly, achieve comparable results at lower cost and with less danger.

I propose that we divert more research dollars to discovering the true causes of disease, which can be traced to improper nutrition, sedentary lifestyle, stress, toxic environmental exposures, and even iatrogenic consequences of the very medicines, vaccines, and surgical interventions we routinely undergo. That can't happen unless we change the goal of healthcare from profit to universal well-being. The challenge is to see if we can maintain white-hot economic growth while reining in the monetary windfall excesses of the food industry, industrial polluters, and medical profiteers.

I think it's a risk we need to take because, at the present rate, our economy and national security will collapse under the burden of diseases of modern civilization.

4) Freedom of choice in healthcare. We have a vast, largely untapped potential of health promoters in America. Integrative MD/DOs, naturopaths, chiropractors, nutritionists, certified health coaches, acupuncturists, herbalists, practitioners of traditional Chinese medicine, holistic nurses, massage therapists, and body workers—all are marginalized and even subject to persecution by medical authorities intolerant of divergent approaches to health optimization.

This is not to say that we should permit a “free-fire zone” when it comes to healthcare. Standards must be maintained, and consumers protected from questionable practitioners. But the current system discourages innovation and rewards conformity. Despite lack of insurance reimbursement for therapies considered “alternative,” consumers are voting with their discretionary dollars to the tune of billions of dollars annually.

Instead of disincentivizing natural health care, our government policies should encourage it. This extends to supplements, which are a mainstay of economical and effective health maintenance for tens of millions of Americans. Recent efforts to over-regulate the supplement industry threaten to

drive smaller, nimble companies out of business, and may ultimately hand a monopoly over supplement manufacture to huge BigPharma conglomerates better-equipped to “schmooze” regulators (Think “One-A-Day” vitamins!).

5) Food Revolution. In prior podcasts, I’ve discussed ways to restore our food supply to wholesomeness and purity. In an interview with Nicolette Niman about her book, *Defending Beef*, we talked about sustainable livestock cultivation. And in a conversation with Mark Schatzker about his book “The Dorito Effect”, we discussed hopeful trends in agriculture science that promise to re-establish taste and nutritional value in fruits and vegetables.

In addition, we need to reshape consumer attitudes toward healthy food. That starts with education, the kind you get by following *Intelligent Medicine* and the expanding resources provided by the health luminaries we curate for you.

We need to wrest our precious food supplies from unscrupulous marketers and misguided government authorities who have steered us wrong for decades. Food “sin” taxes and government prohibitions have no place here. I say “educate, not legislate.” You, as informed consumers, are at the vanguard of the change we need.

I hope you will join with me in continuing to get the word out about these important causes. Consumer pressure can have an impact in swaying company and government policies, even if the battle is often long and slow-moving. Don’t lose heart. Together, we can help enact change that will better our health, and that of the generations that follow.

I want to wish all of you a Happy New Year, and I look forward to working on your behalf with renewed vigor in 2019.

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