
Editorial

Holistic Health Care: Neither New Nor Coherent

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Holistic health care and holistic medicine are terms that have had widespread popular usage in professional and lay literature during the past 15 years in the United States. Advocates of various forms of holistic health abound, and even Norman Cousins has written about the "holistic health explosion."¹ In view of the breadth and diversity of concepts included under the holistic umbrella, one is led to wonder what really is involved in these ideas, to what extent they are new, and to what extent they may reshape the health care system.

In this issue of *The Journal*, Vanderpool has written a thoughtful and critical analysis of holistic medicine and health in this country today which goes a long way to clarify the content and potential relevance of this broad and confusing area.² He effectively dispels two common myths concerning holistic health: that a "holistic health movement" exists, and that holistic approaches to health being advocated today are new.

Vanderpool further identifies four major tradi-

tions of thought and practice that subscribe to the term *holistic*: (1) biopsychosocial diagnosis and therapy, (2) whole-person medical care, (3) high-level healthiness (ie, wellness, health promotion), and (4) unconventional and esoteric diagnosis and healing (eg, acupuncture, iridology, homeopathy, herbal remedies). In each case the origins, characteristics, and goals of these approaches are discussed, including their historical antecedents. In spite of some similarities, no uniform set of theories and therapies can be identified among these approaches, which together do not represent a coherent holistic health movement.³

History provides some useful insights as one attempts to understand the significance of holistic concepts and to entertain in what potential ways current health care practices might be broadened or improved. James Whorton, of the Department of Biomedical History at the University of Washington, has recently written a fascinating chapter entitled "The First Holistic Revolution: Alterna-

tive Medicine in the Nineteenth Century" (personal communication, September 1984). He traces the split between conventional and alternative systems of medicine in United States since the early 1800s, and finds that many of the manifestations of public dissatisfaction with medicine during the 19th century have their counterparts today. For example, iatrogenic illness was recognized as common during the early 1800s as a result of what many believed to be overly aggressive conventional therapies, including bleeding (eg, by incision, cupping, or leeching) and purging. Conventional medicine, especially in the later 1800s, was viewed as overly concerned with molecular interactions.

Many alternative views and modes of therapy developed in reaction to perceived limitations of conventional medicine. These included emphasis on "natural" healing, homeopathy, attempts to demystify medicine, emphasis on self-care, illness prevention, and promotion of wellness, unfounded claims for the effectiveness of various therapies without scientific basis, distrust of physicians' skills and motives, challenging of conventional medicine as a medical monopoly, and attempts to broaden medical licensure laws. Samuel Thompson exemplified the successful, entrepreneurial alternative healer of the time. He not only had a very large following (ie, three million Americans bought licenses to practice his system, and many others took his remedies), but he also worked hard to debunk the conventional medical establishment, including attempts to eliminate licensing restrictions.⁴

Many of the refrains from 150 years ago are readily apparent in the claims of alternative health providers and the practices being advocated today under the "holistic" label. There are widespread pressures to demystify medicine, to broaden the definition of health care and its providers, and to liberalize licensure laws in the name of reform.

What can be concluded from all of this? Several observations seem warranted:

1. "Holistic health care" is neither new nor coherent as a movement, but represents cyclical public dissatisfaction with conventional medicine.
2. The term *holistic* is not sufficiently precise to constructively advance health policy issues.
3. Although the medical profession has much to learn from public expressions of dissatisfaction with current health care practices and institutions, new practices need to be subjected to the scientific method before they are adopted.
4. Family medicine, in particular, has drawn from some of the concepts being put forth under the umbrella of holistic reform in the past 15 years, such as its acceptance of the biopsychosocial model of illness, its emphasis on humanistic and personal aspects of the physician-patient relationship, and its concern with comprehensive care and prevention.
5. Analysis and appreciation of the underlying reasons for the emergence of alternative health care approaches could be useful to the reassessment of conventional health practices and institutions, and to the development of strategies for improving the existing health care system.

References

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