

Evidence Based Medicine, Danger to Progress? Prepare for the “Accidental Blow Up in Medicine”

By Simon Yu, MD

The term “evidence based medicine” (EBM) first appeared in a paper by Dr. Gordon Guyatt et al. as a [new approach to teaching the practice of medicine](#) in the *Journal of American Medical Association (JAMA)* in November 1992. The paper emphasized the examination of evidence from clinical research that is “double-blinded and randomized” based on of statistical analysis of sizeable populations with one treatment variable vs. a placebo, and deemphasized physicians’ intuition and clinical experiences.

We are training young doctors to care for patients from a population-based medical model, not from a humanistic and clinical understanding of the unique individual. This medical training is not from a holistic integrated understanding of the complex interactions of genetics and environment and epigenetic changes, or patients’ real world reported experiences, but from computer generated statistical analyses, based on the average values of large population studies, often conducted by a researcher or medical institution sponsored by pharmaceutical or medical device companies.

You may feel uneasy about “evidence based medicine.” It may sound scientific, but may not be best for you as a unique individual. The system is biased in favor of those who are in the middle ranges of the bell curve and respond as normal or typical. The system is rigged in favor of those who control the evidence – sponsors of those who select the study design, treatment and selection, population and length of time studied – resulting in the individual data that moves upward into EBM via double blinded scientific studies and systematic reviews when the results of multiple research studies are combined.

Today’s medical science dismisses the importance of common sense, experience-based medicine as being unscientific. With that in mind, the *Lancet*, a British medical journal published, [“Could Evidence Based Medicine is a Danger to Progress?”](#) by John Wu in 2005. If everything has to be double-blinded, randomized and evidence based, where does that leave new ideas?

A second trend is the emergence of large-scale analytics of databases of information collected: Big Data. Here, massive datasets of genomic and electronic health records (EHR) data are combined and analyzed for patterns underlying diseases. Despite its promise, Big Data focuses more on the genome than the exposome (total of lifetime environmental exposures and how they relate to health), and more on treatment than triggers. Its biggest drawback is lack of dental data. Dental/oral cavity is a major portal of entry for microbes and materials that can cause infections and inflammation, stealthily yet systemically – asymmetric threats to health – off the radar screen and EHR, untracked, unrecorded, unnoticed.

Functional Medicine, Personalized Medicine and Precision Medicine are on the rise as Evidence Based Medicine is on its way out of favor, based on individuals’ unique biochemistry and genetic makeups. One of the major drawbacks of these newer forms of medicine is that they utilize excessive and often costly lab tests, and lead to micromanagement of biochemistry and treatment based on genetic testing.

Philosophically, I am a big fan of the Functional, Personalized and Precision Medicine approach to individualized medicine - except it is costly with excessive lab tests, and more data does not always give a full picture of what is wrong with you. What happens when they do not deliver? It may turn into dysfunctional, depersonalized medicine based on un-Godly lab tests and getting lost in Big Data. Is it possible to make medicine more successful without using excessive lab tests, and detect missing links for successful outcomes? The answer may be in adding the lens and dimension of Energy Medicine.

Energy Medicine is a broad and highly controversial topic. I cannot cover all aspects of it here. I have been learning, practicing and teaching acupuncture meridian assessment (AMA), a branch of energy medicine based on a 5000-year-old disruptive “meridian” technology. AMA is a digitized, keep it simple stupid (KISS) version of electro-acupuncture (EAV) developed by German Reinhold Voll, MD. AMA enables physicians to directly and quickly detect and then treat often-neglected core problems: dental infections before they have advanced to be visible on X-ray, parasites and fungal infections not easily detected in standard tests, heavy metals and environmental toxins, allergies and nutritional deficits.

I have written about this phenomenon in my articles and my first book, [*Accidental Cure: Extraordinary Medicine for Extraordinary Patients*](#). Ten years later, I am launching my second book, [*Accidental Blow Up in Medicine: Battle Plan for Your Life*](#). It gives an in-depth look at how to detect and treat deeply hidden dental problems and parasite/fungal problems which are ‘asymmetric threats’ to health. My goals: 1) teach how to better diagnose and treat patients with complex, chronic medical problems who have been neglected by conventional medicine, 2) bring physicians and dentists to work together as teams to diagnose and treat the body as a whole, 3) educate physicians about how to use antiparasitic and antifungal medications to rebalance tooth-organ meridian pathways to restore the immune system and how to combine them for lasting effectiveness, and 4) self-help resources for patients on limited budgets, with concrete steps to assist the healing and recovery process.

The book weaves together patient and physician stories of the two elements for success: 1) the quest to recover, learn new concepts and do whatever it takes get better, and 2) the commitment to develop battle plans to counter unconventional, asymmetric threats, and restore healthy immune systems. Case studies include full or partial recovery from stage 4 multiple myeloma, breast and lung cancer, chronic Lyme disease, mold toxicity, and autoimmune and neurological diseases such as fibromyalgia, irritable bowel syndrome, myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS), multiple chemical sensitivity, multiple sclerosis (MS), neuropathy, ALS, severe autism in a child, and more.

It is time to take a quantum leap beyond Evidence Based Medicine, Functional Medicine, Personalized Medicine, Precision Medicine and Big Data. Acupuncture meridian assessment (AMA), a branch of Energy Medicine, utilizes the holistic body/dental/gut/brain systems approach of Integrative Medicine, Energy Medicine and Biological Dentistry. It can provide the missing links and create a constructive multiplier of shock waves to the medical care system as we know it in this book: [*Accidental Blow Up in Medicine: Battle Plan for Your Life*](#).

Dr. Simon Yu, M.D. is a Board Certified Internist. He practices Internal Medicine with an emphasis on Integrative Medicine to use the best each has to offer. For more articles and information about integrative medicine, patient success stories, and Dr. Yu’s new book, [*Accidental Blow Up in Medicine: Battle Plan for Your Life*](#), visit his website at www.preventionandhealing.com or call Prevention and Healing, Inc., 314-432-7802. You can also attend a free monthly presentation and discussion by on Integrative Medicine at his office on the second Tuesday each month at 6:30 pm. Call to verify the date. Seating is limited, arrive early.



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