

Anecdotes do not make for evidence

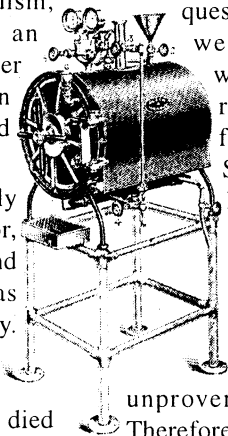
The article by Ashok Vaidya (1) 'Ethics in the Clinical Practice of Integral Medicine' gives two case studies where in one case the patient, a young girl with hypothyroidism, was harmed by going to an ayurvedic doctor and in the other case the patient, a young man with viral hepatitis, was helped by going to one.

In the first instance, the family of this girl, presumably a minor, put their faith in a practitioner and a system of medicine that was recommended by the community. Despite worsening health status, the family chose not to seek alternatives and the patient died of a curable disease.

In the second instance, the patient had viral hepatitis. Dr Vaidya does not tell us whether this was Hepatitis A or B or C. Presuming it to be the common variety in India, Type A, the natural history of the disease is one of abrupt onset, steady increase in serum bilirubin, a plateau and then a slow spontaneous recovery. Western, or allopathic medicine prescribes only supportive care. Dr. Vaidya does not cite a reference to prove that Ayurvedic treatment shortens the natural history. This is a serious omission in a scientific article as it does not allow the reader to go to the source and make up his/her mind about the validity of the claim by examining the sample size, the method of selection and blinding, parameters to measure improvement, statistical methods used, etc.

His recommendation is that practitioners "display... information on the training, degrees, and experience ..." will not give patients adequate information about the scientific validity of the therapy. He says, "Have we to always wait for western science to validate remedies which have been used in India for thousands of years?" If we do not carry out systematic studies, based

on principles formulated and perfected by Western science, to validate alternative (Ayurvedic etc) remedies, we will be continually forced to rely on word-of-mouth recommendations in place of evidence-based care. Therefore, his question should be, "Should we continue to rely on word-of-mouth recommendations to follow the advice of Dr So-and-So, rather than have scientific studies that prove the merit of the therapy being advocated?"



Western medicine too has examples of unproven yet popular therapy. Therefore, it is important that all therapies, irrespective of their origins (Allopathic, Ayurvedic, Homeopathic, etc) be scientifically validated by the best standards currently available.

The article by Kothari et al, 'Ethics and Evidence-based Therapy' (2), in the same issue of *IME* is flawed by excessive reliance on anecdotes and hearsay to prove a rhetorical point rather than provide a skeptical analysis of a phenomenon. It should have been interesting to study and

analyse why Mrs Kothari's breast cancer did not progress. Surely the authors do not advocate a wait-and-see approach for all breast cancer cases. So, what was unique about the pathology, clinical features, social aspects of this case that made the doctors' decision the correct one — on retrospective analysis — for that is the crucial difference here. Had Mrs Kothari died in pain, cursing the doctors who advocated the wait-and-see approach, then her case would not have been touted as a miraculously correct decision by the doctors involved. We need to know, before, not after, what are the ingredients that allow us to advocate the correct therapy, not allowing the fashion of the moment to rule our judgement. These anecdotes do not deserve inclusion in an article titled ".....evidence-based therapy" as anecdotes do not constitute evidence.

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References :

1. Vaidya Ashok: 'Ethics in the clinical practice of integral medicine'. *Issues in Medical Ethics*. 1999; 7: 9-10.
2. Kothari Manu et al: 'Ethics and evidence-based therapy', *Issues in Medical Ethics*. 1999; 7: 16-18.

Advertisement approved by the IMA?

This is to bring to your attention an advertisement on the back page of the June, 1998 issue of the *Journal of Occupational and Industrial Medicine*, for the soap Lifebuoy Plus. The ad carries the claim that it has been approved by the Indian Medical Association.

If the claim is authentic, the question arises of the credibility of the premier organisation of medical practitioners in India. Are the different medical associations empowered to approve these consumer products? I feel that the use of names of medical associations to promote products and influence consumers is unethical on the part of

the advertising agency as well as the medical association. Would you look into the matter and inquire with the related parties?

Dr. Deep Bhandare, Shrey, Plot no 57, Krantinagar, Porvorim, Goa 403521.

Note: The advertising agency confirms that the Lifebuoy advertisement contains a statement of certification by the IMA. Dr Kishor Gandeja, president of the Mumbai branch of the IMA confirms that the IMA is endorsing some products, after conducting laboratory tests. Dr Ruparel, Maharashtra state vice-president of the IMA, will look into the matter and respond to this letter in the next issue of the journal.