THE PROMOTION OF FALSE OR MISLEADING HEALTH-RELATED INFORMATION OR PRACTICES

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Purpose of Submission

I write in the capacity of a dedicated member of the public and parent of a child who relies heavily upon our existing health framework of 'accepted medical practice.'

I note the broad scope of this inquiry and focus on 'unrecognised' health service providers and 'promotion of health-related activities and/or provision of treatment that departs from accepted medical practice'. I am aware that the definitions of 'scientific' practice, 'accepted' medical practice and 'health' itself are open to interpretation and as such may potentially bias the assessment of the true merits of yet to be recognised Complementary Health service providers.

With respect to the Terms of Reference I will provide insight as a recipient of the current health system and recognised medical view of its limited capacity and danger of a strict reliance on old-hat evidence-based medicine being the 'only' answer at a time when there exist emerging Complementary modalities which have been well evidenced by way of experience based practice to be of undeniable, significant benefit to individuals.

Increasing public support for Complementary Therapies indicates a clear benefit of these Complementary Therapies in their support of Medicine – with these yet to be 'recognised' therapies working alongside existing Medical models in assessment and diagnosis, preventative health treatments and medical treatments and in many cases supporting individuals in a holistic approach to 'know thyself' to be free to make their own decisions with regard their health.

I thank you for the opportunity to submit from the perspective of a recipient of the current Medical model and an advocate of certain Complementary Therapies.

Introduction

This submission addresses the Terms of Reference from the perspective of a child within the current system which failed to consider the whole of the child's health needs with harmful consequences impacting the health and wellbeing of the child.

Largely this was a result of an unwillingness of recognised practitioners and health service providers to consider therapies, testing and treatment advice that had not yet fulfilled strict 'scientific' criteria - predominantly on the basis that these emerging cutting edge treatments were new and therefore 'unconventional ' and currently 'unrecognised'.

Case Study

A tried and tested model was applied to our child in an attempt to determine her diagnosis and needed treatment plan. This model began by assuming her to have a certain condition and applying relevant assessments and clinical tools to confirm the diagnosis whilst determining the severity and degree of disability. The assessments required in cases that a response be given in order to 'score' and did not consider the anxiety of the child at the time (aged 3 and 4) and the child's ability and willingness to participate and respond. Our child didn't 'comply' with testing or respond as required and scored zero. These assessment results were heavily relied upon to build a solid 'evidenced' picture of her needs and to plan intervention strategies and therapies accordingly.

On the basis of medical and scientific assessment, our child was assessed as being severely delayed and incapable on paper yet this result was inconsistent and contrary in many respects to the child that lived with me on a daily basis who I experienced to have greater ability, awareness and understanding than indicated by the reports and a child with underlying anxiety, confidence issues and some physical limitations that remained unaccounted for by the accepted medical model.

Given my awakened understanding as a result of self-healing and studies with Complimentary Health Provider, Universal Medicine, I understood the great importance of both Conventional Medical Supports for our child and that for true healing of illness and disease, it was necessary to consider our 'whole' health, the underlying root cause of conditions and the experience-based evidence of listening to our body and acting accordingly.

Both State and Local Health providers involved in our child's health were unwilling to consider the full picture of her needs, her emotional and psychological well being, deep seated anxiety nor her behavioural issues that were evident to me as a parent and frequent observer of her health and behaviours. The view espoused at the time was that the assessments are 'it' - conclusive and definitive and as far as they were concerned (as the reports determined), this limited definition was who she was.

Medical Opinion was unable for some time to provide a diagnosis for our child who continued on the treatment program to address her weaknesses. Needless to say, there was little if any improvements in the areas of Speech and Language, Occupational Therapy nor Physiotherapy. Meanwhile, the unaddressed issues of anxiety and behavioural issues worsened and remained untreated. Testing repeatedly produced the same results, which further cemented the view of our child's narrowly defined health issues and limitations. Paediatricians were attended upon who relied solely on the 'evidenced' medical reports conducted prior and on the basis of consistency between the reports were unwilling to consider that a child's anxiety and other underlying issues may have impacted the accuracy and relevance of those assessments and produced a biased result. Our child 'consistently' scored zero – and upon the basis of their being a 'consistent' result and these being 'recognised' scientific and medical assessments, this was deemed by all to be a 'valid' result.

My impulse to seek beyond the current medical view which did not fit with what I knew my child and her abilities in-truth to be and to consider the 'whole picture' and not accept a limited view was considered 'unconventional' and therefore antiintervention for my child when in truth I was fully aligned and pro- Medicine – I was simply aware of the inadequacies of relying solely on a 'test' and snap-shot observations in controlled settings when experience –based evidence was strongly indicating there was far more to consider.

My concerns were disregarded by Medical providers, in favour of the amassed 'scientific evidence' with our child eventually being diagnosed at the time to have a 'non-specific global development delay'. No further investigation was deemed necessary and our child's underlying issues remained untreated.

What is remarkable if we consider our child a case study is that her health did not improve and in fact deteriorated throughout this period, yet all of the treating medical providers and therapists did not question their assessment, diagnosis, treatment regime or the lack of improvement in health as a basis for further investigation or concern. It was apparent that the populist intention was to put her into a medical 'box' and from here her condition would be understood. There was no capacity or openness to consider there may be more, that she may not fit into a 'box' nor fit with a label – she was seen through the limited eyes of reports and assessments that remained blind to the whole and all contributing factors.

Medicine is founded on the premise to do no harm yet what if a narrow medical perspective that does not allow for emerging experience-based medicine and therapies is harmful by virtue of excluding what is currently available to support Medicine to deliver a true answer and the needed whole for the wellbeing and health of Humanity?

I sought some independent cutting-edge testing being trialled at a University in Melbourne from some a reputable Complementary Health Provider during this period to address ongoing digestive issues that were significantly impacting our child's overall health however had remained undetected and non-evident in routine testing and therefore remained untreated.

3

Results confirmed by a GP with Biomedical expertise indicated that our Child had a severe strep infection in her GI tract and a leaky gut syndrome of unknown longevity with the high strep bacterial colonisations reported to have relevance to cognitive function and memory (significant given our Childs delays). The prescribed treatment was highly successful with incredible gains in health, development and wellbeing within weeks. It was also recommended at the time that further related testing be conducted by the treating Doctor. A Paediatrician overseeing our child's health at the time would not endorse the testing, nor would he recognise the strep condition and treatment success of the leaky gut syndrome on the basis that the new 'testing' that had been conducted was 'untested' and in its infancy and he would not recognise it nor the merits of dietary medicine until the concrete proof appeared in a 'scientific journal' one day. He admitted that he would 'probably be proven wrong one day' in reference to his denial of the merits of dietary medicine but he would wait until he was.

Therein lies a danger in considering published 'scientific' knowledge as the only evidence within Medicine at the exclusion of our body and lived experience. What if our body gets sick when we eat a particular food yet it doesn't show up in allergy testing? – Do we continue to suffer by eating this food because the testing is 'it' and therefore conclusive – do we override and deny what we know and feel in our body by esteeming the accepted medical knowledge and practice to be more knowing than ourselves?

I continued to seek further medical opinion for the whole of our Child's health to be considered, explored and thoroughly investigated, despite how this challenged many providers training and accepted medical views. Recently a Paediatrician recognised experience-based **evidence** to be more significant than the evidenced reports that had medically defined our child up until now. By a willingness to consider the whole of her health and wellbeing and all contributing factors, It has since come to light that our child has cerebral palsy and sophisticated behavioural issues which have remained undetected and unrecognized by 'accepted medical practice' up until now.

An inappropriate treatment program of some years and undetected medical condition have had a detrimental impact on our child psychologically, developmentally and socially. By the whole now being acknowledged and honoured and the underlying issues addressed, our child is able to receive the very best therapy available to her, her medical providers are able to understand and relate to her differently, collaborate effectively to provide appropriate medical treatment programs specific to 'her' needs and providers are now recognizing the merits of providing treatment that may deviate from the 'accepted medical models' - recognising in many instances that people and health cannot be solely defined by 'medically accepted' and 'scientifically accepted' assessments and reports and that although these have a place and importance within Medicine they offer limited understanding – as they provide a piece of a greater whole.

In conclusion

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Illness and Disease in the world is at an all time high and increasing. Can we afford to assume that Medicine or Science already know all that there is? There are countless examples of 'scientifically proven' medical views that are later retired and others once considered 'quackery' that have since been incorporated into the existing model.

Whilst I agree that regulation is needed, an inflexible regime will not promote freedom of choice and encourage humanity to take self- responsibility for their health care. Can we really afford to exclude emerging therapies and deny irrefutable experience-based evidence of their healing benefits of such on the basis that they are not yet 'recognised'?

A blanket exclusion of Complementary Therapies on the basis that they are currently 'unrecognised' allows people in need to be denied the opportunity to choose reputable, all-encompassing, wellness-serving treatments by their free-will and choice whilst retarding the development and evolution of the natural science of Medicine and greater knowing that is available for the benefit of a 'well' Humanity.

With Grace

Deborah McInnes