Submission No 67

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

Name: Mr Ian Shepherd

Date Received: 12/12/2013

The Committee on the Health Care Commission Parliament House Sydney NSW 2000

Dear Sir,

Ref: Inquiry into the promotion of false or misleading health-related information or practices.

I wish to comment on the terms of reference as follows:

(a) causing mistrust of, or anxiety towards, accepted medical practice.

A professional group can only gain public trust by the quality of its academic pursuits, the published record of its own achievements, and its perceived value to the public, not by legislative protection. Can you imagine similar future inquiries about "accepted legal practice", or "accepted architectural practice". or "accepted engineering practice"? Certainly not, which shows that this inquiry is misconceived.

(b) refusal of preventative health measures, medical treatments, or cures

Within the last decade, young men were being urged to have an annual PSA test, as the best means of avoiding serious prostate cancer. Now that advice is known to be wrong.

In the early 1990's, my wife was told by her Specialist Oncologist that what she ate had no effect on her cancer. Now diet is known to have a strong link to cancer. Australians have the highest prescription rate of statins in the world. People at low risk of heart problems are prescribed the drug, although there are known, and serious side-effects of the drug.

These are a few examples of medical practice that is evolving. At any time, a person must be able to take responsibility for their own welfare and say that a

preventative health measure, treatment or cure is not for them, especially if the published research has only recently evolved into "accepted medical practice". On the other hand, I do accept the fluoridation of water supplies, the vaccination of children against diseases, and quit-smoking campaigns against lung cancer and heart disease, because of the high-quality, long term research that underpins the work.

(c) activities/treatments that depart from accepted medical practice which may be harmful

All medical practices are capable of doing harm. Side effects exist for most drugs, sloppy hygiene increases serious infections in hospitals, operations can cause death or injury due to mistakes. Modern medicine operates on the basis that the benefits outweigh the risks, otherwise we would certainly never be using chemotherapy or radiotherapy, which are known carcinogens and cause injury to the body's major organs.

If the issue of harm is not the issue in this term of reference, we are left with discussion about "accepted medical practice", which has already been covered under (a) and (b).

- (d) and (e) No comments
- (f) any other matter

The medical industry must be capable of dealing with criticism of its opinions and activities from within. It needs to work out how to better promote its research and its treatments, so the public's trust and confidence can be maintained. Views that challenge its hypotheses must be welcomed and addressed publicly. Hiding behind a wall of legislation can only enhance further mistrust. If the Government sees public health outcomes are at stake, then it should be prepared to fund the public education process required.

Yours sincerely,

Ian Shepherd