



## Huge court fight may be in offing as Ontario college considers penalty for maverick MD

Charlotte Gray

### In brief

Physicians who practise alternative medicine are paying close attention to the case of an Ontario physician who was found guilty of professional misconduct. The College of Physicians and Surgeons of Ontario says it is simply doing its job. Dr. Jozef Krop says he was doing the same.

Ten years ago, Dr. Jozef Krop of Mississauga, Ont., received a letter from the College of Physicians and Surgeons of Ontario that expressed concerns about some of the “highly unusual” treatments he employed. It was the first letter of many.

Last December the college found Krop guilty of professional misconduct. It said he had failed “to maintain the standard of practice in the management, treatment and care of 6 patients.” The college says it is simply doing its job, and in the next few months it is expected to set a date for the penalty hearing. But Krop argues that he was simply doing his job too — practising medicine. And why, he asks, would the college target him when none of his patients had complained? He insists he has been unfairly targeted by a disciplinary body that has an irresponsibly narrow view of what constitutes medicine.

His rage is palpable. “I am bitter, very bitter,” says Krop, who graduated from medical school in Poland before arriving in Canada 27 years ago. “Ten years of my life have gone to idiotic dealings with people with no heart, no brain. I might have expected to be treated like this in Eastern Europe in the Stalinist era, but I came to Canada expecting justice.”

### A rift is widening

His case highlights a medical rift that appears to be getting wider and deeper. On one side are those who insist on the science of medicine and the need for rigorous testing of new treatments to protect patients. On the other is a small but growing minority interested in unconventional therapies that are not accepted by Western medicine. But if practitioners of these alternative thera-

pies want their mainstream colleagues to take them more seriously, they shouldn’t hold their breath.

During the 10-year course of the Krop case, the two sides have become disturbingly polarized, to the point that it often seems they barely speak the same professional language. “It is a problem,” admits Dr. Edward Leyton, who runs a holistic health clinic in Kingston, Ont. “But complementary medicine operates on a different paradigm from orthodox medicine, and it causes us to be more at odds than we should be.”

The clash within the profession is tense enough, but it is being mirrored and fed by changing expectations outside medicine’s institutional walls. Canadians are increasingly distrustful of “scientific” medicine and eager to investigate therapies drawn from sources as varied as Chinese medicine and homeopathy. That’s why there is no shortage of patients for Leyton, Krop and other practitioners of “complementary” medicine and why drug-store shelves are now groaning with the weight of herbal and related medicines. Most doctors who pursue alternative medicine are deeply committed to their patients, but some may not be. What protection can patients expect if health care providers turn out to be quacks? Or if experimental techniques turn out to be harmful?

Caught in the midst of this debate are the country’s disciplinary bodies, each of which uses a combination of rules and hearings to control medical practice within its boundaries. In Krop’s case, was the Ontario college justified in taking action against a licensed physician because it had doubts about the methods he used? Or was the college, as Krop’s supporters contend, misusing its power in an attempt to put an unorthodox practitioner out of business? Is the process designed to squelch the emerging field of environmental medicine?

### Things get vicious

The war of words in the Krop case has been vicious. His supporters are adamant that the college’s behaviour is, in the words of Dr. William LaValley, “malicious, malignant and cruel.” LaValley, who chairs the complementary



medicine section of the Medical Society of Nova Scotia, is shocked that “the college has shown a complete contempt for fairness and scientific integrity. Every surgeon knows that you must amputate a gangrenous limb to save a patient’s life. In order to save our profession, the college must exorcize its fanatical and tyrannical leadership that has intimidated too many doctors.”

The college is unimpressed. “This is a sustained, noisy reaction by a very small number of people,” says Dr. John Bonn, Ontario’s registrar.

Adds Jim Maclean, the college’s director of public affairs and communication: “We are not going to get into a shouting match.”

The college’s concern with Krop began in 1989, when it sent him a letter expressing concern about some of the “highly unusual” treatments he employed. A formal investigation into alleged misconduct or incompetence began 2 years later, when the college removed 29 charts from his office. It did not tell him who had made the complaint or what its grounds were. In 1994, Krop learned that he was to be referred to a disciplinary hearing, with allegations of professional misconduct and incompetence. The charges were based on information from the charts removed from his office; none of the patients involved had laid a complaint.

Krop quickly hired well-known trial lawyer Morris Manning to represent him, and a new group, Citizens for Choice in Health Care, began to lobby politicians and raise funds for his defence. Members felt the case would set a precedent.

The college countered by writing to every member of the Ontario legislature. “Those identifying themselves as supporters and/or patients of Dr. Krop allege he is being prosecuted because he practises ‘alternative’ medicine. This is false. There is nothing in the law or college regulations to prohibit a physician from using ‘nontraditional’ methods in his or her practice, and simply doing so is not in itself grounds for charges of professional misconduct or incompetence.”

The disciplinary hearings began May 11, 1995, and lasted until Apr. 28, 1998 — the 27 days of hearings were spread over 3 years. Krop faced 77 allegations, which ranged from straightforward (“he failed to do appropriate tests and appropriate assessment of his patient”) to the bizarre (“he inappropriately advised that his patient required an air purifier, could only drink pure water, which she had to purchase, and had to avoid hydro towers”).

The case notes for 8 patients were produced. They had presented with a range of chronic symptoms ranging from

respiratory infections to chronic fatigue syndrome.

The college’s expert witnesses challenged the validity of Krop’s practice. The 3 experts named in the 62-page report included Dr. John Anderson, head of the Division of Allergy and Clinical Immunology at Detroit’s Henry Ford Hospital. Krop’s 9 expert witnesses included Dr. Roy Fox, the director of Halifax’s Environmental Health Clinic and a professor of medicine at Dalhousie University.

The hearings did allow Krop to explain the nature of his practice. He described the concept of “total body load,” which underlies his practice methods and involves the sum total of influences on the individual; influences include factors such as temperature, positive ions, electromagnetic fields and toxic chemicals, and various biologic factors such as bacteria.

The 2 physician and 2 lay members of the Disciplinary Committee listened to lengthy arguments on the nature of scientific evidence. Anderson, for instance, described the rigorous conditions an experiment must meet if it is to be considered scientifically valid. He and his colleagues assessed Krop’s practice in terms of scientifically valid evidence. Any evidence produced by Krop’s witnesses that lacked the “basic, essential methodology that characterizes meaningful research” was excluded.

## The Vega machine

The college’s witnesses cast doubt on several aspects of Krop’s practice. “Provocation/neutralization” testing for food and chemical sensitivity was rejected as a way to test for food allergies and described as a potential cause of anaphylactic reactions. The college’s experts also challenged Krop’s use of the diagnoses “Candida-related complex” and “multiple chemical sensitivity syndrome.”

Krop’s most controversial practice was his use of the “Vega machine.” In this test, which is based on “bioenergetic regulatory theory,” a patient holds an electrode that is connected to the Vega machine; a second electrode is connected to the patient’s toe. A drop of antigen extract is then placed on the machine and any change in electric skin resistance is registered. Krop says the Vega machine can determine biologic (as opposed to chronologic) age, assess “geopathic stress” and test for cysts. Damage to a specific organ can also be detected, he told the panel.

Most of Krop’s own witnesses were sceptical about Vega testing, although some agreed that electrodermal testing might have some value. The college’s witnesses were scathing. They said Krop’s Vega machine was “un-

---

**“I might have expected to be treated like this in Eastern Europe in the Stalinist era.”**

---



scientific, inappropriate, unproven and constitutes an unacceptable standard of medical practice.”

By and large, the Disciplinary Committee accepted the arguments put forward by college witnesses and ruled that Krop fell below the standard of acceptable medical practice in Ontario. The December ruling that Krop was guilty of professional misconduct outraged his supporters. Helke Ferrie, who is married to an Ontario urologist and is writing a book about the Krop case, immediately published an article in *Consumers' Health of Canada* entitled “The Kafkaesque Conviction of Dr. J. Krop.”

Ferrie had consulted Krop after “mainstream medical doctors had treated me like dirt.” She says Krop “chelated me and put me on my feet again.” According to Ferrie, college authorities are “a few dinosaurs . . . kept well fed by those who stand to gain by keeping us sick.”

Edward Leyton, who acted as a character witness for Krop, used more measured terms. “I don’t think the panel [members] ever understood the science of complementary medicine. They cannot accept that research that is not university based and double blind is still valid.” He refused to comment on the Vega machine — “I don’t use it” — but argued that the college was involved in turf protection. “The college is hostile to environmental medicine because it has a long history of defending everything conventional and putting down unconventional therapies that threaten its control. In its 62-page report, it accepts everything its own witnesses say and rejects everything Dr. Krop’s witnesses say.”

### “A travesty”

LaValley describes the hearings as “a travesty of justice.” He defends Vega-type electrodermal testing as a useful screening tool, but says that people who are not versed in quantum physics cannot understand the Vega machine. He also says that much “scientific” medicine is based on research that does not satisfy scientific criteria. “We would have to throw out most drugs, cancer therapy, surgery, and psychotherapy if we had to stick to scientifically valid, clinically controlled, double-blind-tested treatments.”

In light of the publicity generated by the Krop case, which received front-page coverage in the Toronto area, the college issued a press release a month after its decision was released — the first time it has done so. It stated: “Dr. Krop was *not* found guilty for practising environmental or complementary medicine, neither of which are prohibited by either Ontario law or College regulations.” It quoted

some of the panel’s criticisms, including Krop’s use of the Vega machine and his practice of injecting vaccines prepared from a patient’s own blood and sputum.

Where does the Krop case go from here? His supporters are busy raising funds to take his case to court if the college decides to suspend or remove his licence. “We will win on appeal,” says LaValley, “because there has been such a gross violation of natural justice.”

He is convinced that Krop is simply the focus for a sustained attack on environmental medicine by a power-hungry college. He cites an internal memo written by Dr. John Carlisle, the college’s deputy registrar, in

1989: “This may be a costly and lengthy process, but it may be the only way of finally, once and for all, dealing with these clinical ecologists.”

The college declines to talk about any of these aspects of the case. “Because the whole matter may still be subject to legal action,” says Jim Maclean, “we are not prepared to comment.”

Since the college first expressed concerns about Krop’s practice 10 years ago, alternative or environmental medicine has inched — very slowly — toward respectability. Provincially funded environmental health clinics have been established in Toronto and Halifax, and the Ontario Medical Association has given probationary status to a complementary medicine section.

“I am not against drugs,” says Krop, “but I am terribly against the stupid overuse of antibiotics, especially when they are prescribed over the phone. I am appalled when I see children of 4 or 5 years old who have had 10 or 12 prescriptions a year.”

In 1995, the peer review committee of the American Academy of Environmental Medicine reviewed the case against Krop and found “no evidence of professional misconduct.” It stated that Krop’s practice was “in keeping with the highest principles and standards of modern medicine.”

Thus far, the case has cost Krop far more than the \$700 000 he has already raised to pay the fees of his lawyers and expert witnesses. “I have no time now to be creative, to develop my practice, to go to conferences. I have no time for vacations or rest,” he says wearily.

“All the time I am just raising funds for my defence. But as long as I have life, I am going to fight the college, which is looking for absolute power and which is terrorizing the whole profession.”

*Charlotte Gray is a contributing editor at CMAJ.*

---

**“This is a sustained, noisy  
reaction by a very small number  
of people.”**

---