



The charm and the leaf

The power of hope: a doctor's perspective

Howard Spiro, MD

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We have a problem in conventional medicine nowadays. When (or if) our patients improve, we assume this to be the result of the medicines we prescribe and the procedures we perform. We believe that the actual *person* of the doctor doesn't make a difference. For a lobar pneumonia, amoxicillin prescribed by Dr. A has the same effect as amoxicillin prescribed by Dr. B. In practice, the truth is not so simple. The person with the pneumonia — as opposed to the bacteria that have caused it — doesn't respond in the same way to every doctor.

This probably isn't much of a surprise: at some level, most of us accept that there is more to making patients feel better than medicine alone. We all know that some doctors make some patients feel better more quickly than the average (sometimes even before medications are started) and that, on bad days, using the same medication for the same condition, the same doctor may produce a less satisfied patient. We all have some patients with whom we seem to do brilliantly well, and others with whom we don't. As Socrates said to Charmides in explaining the cure for headache, "the cure itself is a certain leaf, but in addition to the drug there is a certain charm which if someone chants it, the medicine altogether restores him to health, *but without the charm there is no benefit from the leaf*" (italics mine). Of course, we are not talking about "charm" in the sense of a magic spell or incantation, nor about "charm" in the sense of sweet-talking or razzle-dazzle. That statement by Socrates really refers to all of those factors surrounding the physician-patient interaction that change the patient's expectations of the disease and treatment and his or her per-

ception of the outcome. We are talking about an awkward and uncomfortable subject: patients' psychological assessment of their illness and its symptoms, and their interpretation of all the things we do to try to improve the situation. We are talking here of placebos, of patients' hopes and responses, and the many implications of these.

In this wonderful book, Dr. Howard Spiro neatly unpicks the many tangled threads of the placebo issue. His stance is particularly useful not only because it is free of mysticism and dewy-eyed wonder, but also because it is so well researched and documented. He starts with the important reminder that "disease is what the doctors find, but that is quite different from illness, what the patient feels." He moves on to discuss the role of placebos as anything — including a procedure — that is "objectively without specific activity for the condition treated." He then looks at the role placebos have played in the history of medicine (for centuries there wasn't much else) and how the recent focus on science has led many of us to do more for the disease and (unfortunately) less for the patient. A Yale-based gastroenterologist, Spiro gives a trenchant and well-founded discussion of the deficiencies of contemporary US-style medicine, particularly in the way it has weakened and strained the physician-patient relationship. He analyses why conventional physicians are antagonistic to the idea of placebos, and then (in a full and thoughtful chapter) why practitioners of alternative medicine aren't.



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Spiro puts forward some practical criteria for the use of placebos. They should be used only after a careful diagnosis and should not have any therapeutic action of their own. The physician should not tell outright lies to the patient, and should not give placebos to patients who have asked not to receive them. They should never be used when treatment is clearly called for, or when alternatives have not been discussed. Spiro also provides a useful discussion on informed consent. On this subject, I once proposed that we all post a sign in our waiting-rooms that reads: "As part of your treatment your doctor may prescribe certain drugs that have not been shown to have a specific activity against disease. Nevertheless these drugs are completely safe and many patients find them beneficial. If your doctor thinks they may help you, she or he may recommend them to you." Patients would be given the opportunity to specifically decline this option.

The Power of Hope sets the stage for a serious discussion that our profession must have. Without that discussion we will be perceived, correctly, as a rather cold, science-centred group with an unfortunate tendency to focus on disease while paying too little attention to illness. This book is the most thoughtful and beguiling essay I have read on the art of the science of medicine. Nowadays, the science of medicine is not enough: our patients demand, quite appropriately, the art of that science as well. We sometimes have the leaf, but we always need the charm that goes with it.

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Reference

1. Buckman R, Lewith G. What does homeopathy do — and how? *BMJ* 1994;309:103-9.