

## Functional Dysfunction Part I

by Galen Colton, CMT, CSST

*Functional Dysfunction.* This is a phrase I often use as well as structurally notice in my practice and witness in observing people moving about. What is this I am referring to? It may take some training to notice the subtleties of this “phenomenon” but all you really need are your eyes and some awareness and a feel for efficient body posture and movement.

Look in the mirror or at those around you. Perhaps you notice a shoulder is higher on one side to the other, is the rib cage square and even, does one hip seem higher than the other, does the head rest squarely upon the neck or does the neck seem to take a hiatus in its path from shoulder to head? In observing walking do things really flow evenly or is there some perceived compensation in movement? Is there equal gait length between the legs or does one leg seem to take one path and the other a bit

different trajectory? Does one side of the body seem to be ahead of the other when approaching? Yes? Maybe a little bit? Well that is what I refer to as *Functional Dysfunction*.

Yes, we are moving and getting along but efficiently and optimally? Perhaps not.

These few examples can also be creating overuse syndromes, undo wear and tear on the body, discomforts and even pain we just put up with perhaps for great lengths of time thinking this is just how it is now. Inefficient body position and movement can create scenarios for chronic or acute injury and unnecessary fatigue in both activities of daily living (ADLs) and athletic endeavors and rob us of full freedom of movement, strength and power as well as the ability to relax.

Consider your car. We prefer it to be in alignment for efficient and accurate steering and movement. If it is out of alignment you may have to fight it to go straight forward and turning the vehicle just isn't right. Let that go for awhile and you notice uneven wear on the tires and possible damage to the components of steering. But even though inefficient it gets you around even with the wear and tear. *Functional Dysfunction.*

Curious how we will get thee to a mechanic to fix this but cruise around ourselves and put up with and compensate for inefficiencies of our own function.

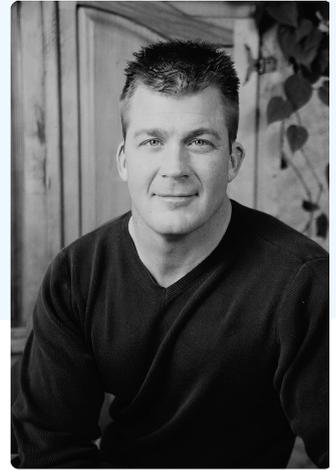


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Now back to considerations of the human body. We have over 600 named muscle groups and over 200 bones that create a complex system with vast connective tissues that support and move this musculo-skeletal system of ours. Where bones meet they create joints and muscles connect to the bones to create a lever system for movement and stability. And other very important connective tissues are present for overall strength and stability. Each muscle group has a specific line of pull upon the skeleton which, when contracted, can generate great strength and power. We call these the prime movers of that particular movement.

There are other muscles that may also contract to assist the movement, though not as powerful in that movement due to their particular line of pull, they are essential for full strong motion - these are called synergistic. All the while other muscles may contract to stabilize a body segment to give a solid connection in stabilizing the skeleton so a strong efficient base is maintained for strong

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movement - logically called stabilizers.

Though this is a very simplified elementary explanation perhaps you can see that even the simplest of movements have some complex variables. Our body is an incredible system and when things aren't just right we don't shut down, but keep going. Our musculo-skeletal system is no different and keeps us moving even thru compensation; ergo *Functional Dysfunction*.

Not as strong nor efficient and sometimes these movement patterns create pain, tension, weakness, tendonitis, bursitis and avoidable over use syndromes and other problems when we are "out of whack". Also when we embark on strengthening our bodies with exercise there is the possibility we are strengthening a dysfunctional

and inefficient movement.

Our body as our car will carry on even in dysfunction. We will compensate but at some cost to strength of movement, energy, and possible injury. The body will move as well as it can and just get you there. It doesn't ask "how do you want this movement done?" it just moves with the resources provided. We don't have warning lights but we do hopefully have awareness.

In the next issue we will continue this discussion and give more insight on how muscles work, dysfunctional movement patterns and ways to identify and overcome them. Is there a therapeutic massage in your future?

## Can Vitamin D Prevent MS?

A new study recently published and conducted by the University of Oxford follows on an earlier study published in the *Journal of the American Medical Association* in 2006. This new study compared sunlight intensity levels throughout the UK during an 8 year span and compared it to the number of multiple sclerosis patients in each region.

The study found a distinct correlation between sunlight levels (and implied exposures) and variations in MS levels in regions of England and the UK. The more sunlight exposure the region has, the lower the instances of MS and related glandular fevers.

**File this into the "Is There Anything D Can't Do?" drawer!**

# Letters To The Editor

We received a lot of letters this month with some great questions from readers of the newsletter. So let's get right into them!

**There is a lot lately about cell phones causing cancer. Is this valid and if it is, can we avoid it? I think Health Freedom Network had an article on this in a recent issue. -Mary, Cleveland, OH**

Hi, Mary, and thanks for the note. There has been a lot of study into the electromagnetic fields and the radiation (EMR) that mobile phones produce. Scientifically, it's relatively inconclusive, but evidence is suggesting a link between phone use and brain tumors. We talked about this in issue #376. To avoid this possibility of damage, the Environmental Working Group recommends the use of headsets and that the phone be kept away from the body (at least 1 foot). Reducing the amount of cell phone use overall is also recommended. You will likely find ShaneShirly-Smith's article in this issue informative as well.

**I go to see a regular doctor every three months to monitor my blood pressure. I am not on medication for it but read about caffeine possibly being a contributor to hypertension and have not heard this mentioned by my doctor. Does coffee affect your blood pressure? -Quentin P.**

Thanks for the great question, Quentin. Blood pressure is increased in some people when two or more cups a day are consumed on a regular basis (equivalent soda and other caffeine sources included), according to a study published in 2010 by the University of Maryland. For most people, though, moderate caffeine intake is not detrimental and in some cases, may even be beneficial. The question is how much, how often, and what for.

If you're drinking coffee daily, consuming more than a couple of cups, and are doing so because it helps you feel alert (or suffer from chronic fatigue), then you probably have something else you need to work out that the coffee usage is covering for. Most likely, you have a physical issue, likely toxicity or a

nutritional imbalance, that the energy boost caffeine gives is making up for. If you've been following since issue #377, then you have seen one possible solution in our series on whole body detoxification.

**Will reducing cholesterol through diet help to lower cardio problems later in life? -Anonymous**

It can't hurt, since most of the dietary changes that are undertaken to lower cholesterol are healthy choices to begin with (e.g. raising the ratio of vegetables vs. meats). With that said, it should be noted that the medical community as a whole has put a lot of emphasis on cholesterol and is, in fact, markedly confused about which type of cholesterol is actually "bad" and which is not. Coronary diseases are not caused by cholesterol itself or even cholesterol's effects. In fact, evidence suggests that high cholesterol counts may be just another symptom of the real, underlying problem.

That problem is most likely a mixture of things: genetics, diet, exercise levels, etc. No study has shown, for instance, that the use of statins (most commonly prescribed for high cholesterol) actually reduces risk of death from cardiovascular complications (heart attack, stroke). Most alternative medical practitioners agree that overall inflammation of the body tissues is really the issue to be dealt with by intervention. This can be accomplished through simple dietary changes, moving the person to a lower-fat, less inflammatory diet heavier in vegetables and fish. Lowering sugar intake overall is paramount. We talked about the evils of sugar in a recent post on [HealthFreedomNetwork.com](http://HealthFreedomNetwork.com).

Thanks for all the great questions! If you have a question you'd like me to research an answer for, send it to [editor@healthfreedomnetwork.com](mailto:editor@healthfreedomnetwork.com) and I'll do my best!

-- Aaron Turpen



# New Study Says Cell Phone Use is Safe ..or Not?

Worldwide, on any given day, almost 5 Billion people use cell phones. In recent years, the safety of using cell phones has been called into question and numerous studies have been done to try to properly assess the risks. Although it is not like an X-ray, the type of radiation coming out of a cell phone is called non-ionizing and it is like a very low-powered microwave oven. Think of what microwave radiation does to your food and you will get an idea as to why there is so much concern over cell phone use. Still, recent studies as to the carcinogenic effects of cellular phones, seemingly contradict one another. Consumers are beginning to wonder if they will ever get a straight answer as to whether or not using cell phones is safe.

In May of this year, a group of 31 scientists from 14 countries, including the United States, met at WHO/IARC (the World Health Organization's International Agency for Research on Cancer) in Lyon, France to assess the potential carcinogenic hazards from exposure to cell phone radio-frequency electro-magnetic fields. The group looked at peer reviewed studies and

determined that there was an increased risk of glioma, a malignant type of brain cancer, associated with wireless phone use. The outcome was an IARC Group 2B classification of cell phones as possibly carcinogenic to humans.

Conversely, a study published in *Environmental Health Perspectives* in July 2011 and widely disseminated in the media says that, "Although there remains some uncertainty, the trend in the accumulating evidence is increasingly against the hypothesis that mobile phone use can cause brain tumors in adults." This conclusion is based on data from the 2010 Interphone Study conducted in 13 countries. Sounds like our worries are over right? Maybe not.

A closer look at the fine print in the study reveals a statement of conflicts of interest; which states that all of the authors of the Interphone Study currently sit on the International Commission for Non-Ionizing Radiation Protection's Standing Committee on Epidemiology. The statement goes on to say that two of the authors received funding for research from organizations that are funded by the Mobile

Manufacturers' Forum and GSM Association.

You know who the GSM Association is right? According to Telecoms.com, "*The GSMA has evolved to become one of the most powerful trade associations in the world, lobbying governments on everything from tax policy to pricing strategy and producing feature-length documentaries on the improvements that mobile technology has brought to the lives of people across the world.*"

So perhaps consumers are starting to see a bit of a familiar trend in the cell phone safety arena. This trend is one that consumers have come up against for decades and one that they have seen in many other powerful, big business arenas. Like Monsanto with their GMO's, once again, the big business lobbying strength that consumers find themselves up against is why it is more important than ever to stay informed yourself about cell phone safety. Staying informed helps you to make the right decisions for your health, based on what you know, rather than what big business and government tells you.

More information on cell phone safety and 5 green living tips your family can use to easily avoid cell phone radiation, can be found on the Environmental Booty Blog.



Through her website, [www.EnvironmentalBooty.com](http://www.EnvironmentalBooty.com), Shane Shirley-Smith offers consumer information, products and creative partnerships for a greener life and world. Her goal is to help consumers and companies become aware of how their choices impact our health and the health of our environment. By providing a forum for open dialogue with consumers and suppliers, she believes that we are all creating a greener tomorrow.

## Survey Says Women Shoppers Avoiding OTC Drugs for Natural Alternatives from HiddenHealthScience.com

A survey conducted by the Hartman Group on behalf of Boiron, a homeopathic medicine manufacturer, has found that 82% of women shoppers ages 25-70 avoid over the counter (OTC) drugs for headaches and influenza (and similar problems) as often as possible. These women believe that these OTC drugs are not good for them and instead look for natural, alternative options.

The survey was done online and included 1,400 women in the U.S. The participants also believe that the purity and healthfulness of medicines is very important (42%) and 31% said they pay close attention to chemical and irritation-causing content when choosing OTC medications.

Most had not, however, used a recognized homeopathic remedy (only 15%) and about the same number (14%) had given homeopathic remedies to their children in the past year. Most responded that they did not know enough about homeopathy to consider it.

Critics will point out that the survey was conducted by a homeopathic medicine maker, so it's "biased." Well, the majority of surveys done for OTC and mainstream medicine are the same way, usually paid for by a pharmaceutical or drug maker.

## Cause You HAD to Know: What Causes Brain Freeze?

Many wonder what it is, exactly, that causes the intense (and usually very short-lived, thankfully) pain associated with eating very cold items too quickly.

Long story short, it's all about nerves in your mouth. Normally, the nerve receptors that reside on your hard palate (the roof of your mouth) are used to sense pressure and texture to aid in eating. They are also sensitive to heat and cold, of course, but not nearly so much as are other receptors in your mouth. One of the things those nerve receptors in your palate do, however, is signal your brain for defensive purposes.

When it gets hot or cold in your mouth, those nerve receptors let your brain know that the temperature is changing and it should be ready. In the case of extreme cold, such as when ice cream or a Slurpee touch the roof of your mouth, the signals says "it's gonna freeze!"

So the brain amps up blood pressure by constricting the veins, which limits heat loss. Then, of course, no extreme cold comes, so the brain, realizing the palate has cried wolf, abruptly drops the constriction signals. These sudden changes in blood pressure causes you to have a headache.

The best way to avoid brain freeze is to not eat really cold foods. Obviously that would include smoothies, which would seriously deteriorate some of our lifestyles, but there are other alternatives. Try not to let the cold food touch the roof of your mouth and if they do, immediately press your tongue to your palate and let it keep it warm, which will abate most of the "freeze" reaction.

Whateer you do, keep smiling!

### Disclaimer:

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# Whole Body Detoxification, Part 2

In issue #377, we began our discussion on whole body detoxification by starting at the end. Why?

Detoxification begins at the end because when we rid our body of toxins, then end up in bowels, usually from the gall bladder and liver via the blood with toxins from the tissues. So we start at the end and work our way up the chain of command to the top.

Building on what was published in our last issue, today we're going to look at liver and gallbladder cleansing.

The most-often recommended, low-impact cleanses are those of Dr. Richard Schulze. For liver/gallbladder detox, he recommends doing a thorough bowel cleanse first, of course.

Then the formula for liver and gallbladder is simple.

Every morning, before eating, squeeze (if possible) eight ounces of fresh citrus juice – orange or grapefruit with a splash of lemon if you can. If citrus cannot be had, apple juice will also work (leave the sediment in). Water down the juice by adding another 8 ounces of water. Then add:

- 1 clove of garlic (finely minced)
- 1 tablespoon of olive oil
- A chunk of ginger about 1 inch around (finely minced)

The easiest way to mix all of this is to pour the liquid into a blender, skin the garlic, and then add those ingredients to the blender and liquefy. The ginger will negate the garlic and olive oil's tendency to cause stomach upset.



On the second or third day, as you can tolerate it, increase each in proportion up to 4 tablespoons of olive oil and like amounts of garlic and ginger. You can also add the citrus peel from your juice source (assuming it's organic and clean). Many other things can be added as well, including barberry, milk thistle seed, wormwood leaves, bitter greens (dandelion esp.), beets or artichokes. Add in small portion in equal parts, a pinch at a time, to test tolerance.

Another glass of juice as a chaser can help clear the garlic taste from your mouth.

After fifteen minutes or so, drink peppermint or ginger tea to be sure your stomach is settled and to aid in quick digestion.

Within two or three days, you'll notice small stones in your excrement. These are being flushed from your gallbladder and liver (through the gall). These stones normally build up in most people for years. Continue the flush for 5 days or one full week, as you can. A few days' rest (at least 3) and you can do another flush to thoroughly cleanse.

For most people, once the bowels and the liver and gall have been cleaned, the rest of the body will take care of itself. Doing the occasional bowel and liver cleanse (2-3 times a year) along with a monthly fast, abstaining from solid foods and drinking only fresh-juiced fruits and vegetables for 3 days will give you a lot of energy and a very, very different feeling of improved wellness.

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# New Study: Fluoride Can Damage the Brain - Avoid Use in Children

"The prolonged ingestion of fluoride may cause significant damage to health and particularly to the nervous system," concludes a review of studies by researchers Valdez-Jimenez, et al. published in *Neurologia* (June 2011), reports New York State Coalition Opposed to Fluoridation, Inc. (NYSCOF). The research team reports, "It is important to be aware of this serious problem and avoid the use of toothpaste and items that contain fluoride, particularly in children as they are more susceptible to the toxic effects of fluoride."

"Fluoride can be toxic by ingesting one part per million (ppm), and the effects are not immediate, as they can take 20 years or more to become evident," they write.

Most fluoridating U.S. public drinking water suppliers add fluoride chemicals to deliver 1 ppm fluoride (equal to about 1 milligram per quart) intending to benefit teeth and not to purify the water.

"Fluoridation clearly jeopardizes our children and must be stopped," says attorney Paul Beeber, President, NYSCOF. "We can actually see how fluoride has damaged children's teeth with dental fluorosis; but we can't see the harm it's doing to their brains and other organs. No U.S. researcher is even looking," says Beeber.

Valdez-Jimenez, et al. describe studies that show fluoride induces changes in the brain's physical structure and biochemistry which affects the neurological and mental development of individuals including cognitive processes, such as learning and memory.

"Fluoride is capable of crossing the blood-brain barrier, which may cause biochemical and functional changes in the nervous system during pregnancy, since the fluoride accumulates in brain tissue before birth," they write.

Animal studies show fluoride's toxic brain effects include classic brain abnormalities found in patients with Alzheimer's disease, Valdez-Jimenez's team reports.

A different research team (Tang et al.) reported in 2008 that "A qualitative review of the studies found a consistent and strong association between the exposure to fluoride and low IQ." (Biological Trace Element Research)

In 2006, the U.S. National Research Council's (NRC) expert fluoride panel reviewed fluoride toxicology and concluded, "It's apparent that fluorides have the ability to interfere with the functions of the brain." And, "Fluorides also increase the production of free radicals in the brain through several different biological pathways. These

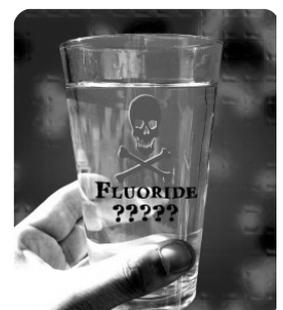
changes have a bearing on the possibility that fluorides act to increase the risk of developing Alzheimer's disease."

On April 12, 2010, Time magazine listed fluoride as one of the "Top Ten Common Household Toxins" and described fluoride as both "neurotoxic and potentially tumorigenic if swallowed."

Phyllis Mullenix, Ph.D., was the first U.S. scientist to find evidence that fluoride damages the brain. She published her animal study in a respected peer-reviewed scientific journal in 1995 and then was fired for doing so.

Vyvyan Howard, M.D., Ph.D., a prominent fetal toxicologist and past-President of the International Society of Doctors for the Environment, said that current brain/fluoride research convinces him that we should stop water fluoridation.

Many communities have stopped or rejected fluoridation in the past several years – the most recent is Fairbanks, Alaska. This year, seven New York City Council Members co-sponsored legislation to stop fluoridation in NYC.



# Diet Soda Found to Cause Premature Birth, Study Says

A new research study, which included nearly 60,000 pregnant women in Denmark, found that those who drink artificially sweetened beverages (carbonated or not) were more likely to have a premature birth. The study was published in the American Journal of Clinical Nutrition.

The researchers found that one serving per day of artificially sweetened, carbonated drinks were 38% more likely to give birth before 37 weeks of gestation (1.38 AOR). Those who consumed four servings of these drinks were 78% more likely to have a premature delivery (1.78 AOR).

Dr. Shelly McGuire, a spokesman for the American Society of Nutrition, was quoted as saying "Certainly, until more experimental work is done, this study suggests that pregnant women should steer clear of artificially sweetened drinks."

Maybe the words "pregnant women" could be replaced with "everyone" in that statement?

According to a whole host of experts, it should be so. Soft drinks in general, in fact, should be avoided according to health practitioners and authors Michael Murray, Joseph Pizzorno, James Duke, Marion Nestle; to name a few.

The abstract for this latest study by Dr. Thornallur Haldorsson, principal author, says that soft drinks in general are suspected of many adverse health effects:



"Sugar-sweetened soft drinks have been linked to a number of adverse health outcomes such as high weight gain. Therefore, artificially sweetened soft drinks are often promoted as an alternative. However, the safety of artificial sweeteners has been disputed, and consequences of high intakes of artificial sweeteners for pregnant women have been minimally addressed."

Results in the study were cross-referenced with women who consumed sugar-sweetened soft drinks. It was found that the possible causative was clearly the artificial sweeteners, rather than the soda or other ingredients. Both carbonated and non-carbonated drinks were included as well with the same result.

The actual physical change that causes the rise in premature birth rates is not known, according to the study's authors. Artificial sweeteners have been connected to a host of adverse health effects, so it's likely that doctors could just take their pick here. The study did point out that most of the premature births were due to medical induction rather than spontaneous delivery and removing data from women diagnosed with preeclampsia also had little effect on the odds for premature delivery and sweetener intake. With all of the other things eliminated as suspects by the authors, it's clear that the artificial sweeteners are changing a fundamental aspect of pregnancy that is usually not measured.

This could include hormone production, muscular or cellular function, or another chemical interaction. Aspartame, for instance, breaks down into three major chemicals: aspartic acid, phenylalanine, and methanol. Methanol oxidizes into formaldehyde and then formic acid, both of which are toxic. These can accumulate in the body and have been linked to premature birth in primate studies.

So, from kidney function loss to cancer to premature birth, these sweeteners sure do have a lot going for them.

# Prescription Osteoporosis Drugs May Not Be The Answer

For countless years, natural health advocates, who suggested caution at the near hysterical and highly advertised push to put women on anti-osteoporosis prescription drugs, were looked at as unscientific health "nuts". But now some mainstream scientists are in total agreement and are even sounding the alarm about those medications. Instead of popping side effect loaded pills, say University of Illinois (U of I) researchers, an effective first course of action to keep bones strong should be to simply increase calcium in your diet and vitamin D or take calcium and vitamin D supplements.

But, you may say, you just had a bone density scan and your doctor claims your score shows you are at high risk for the bone-robbing condition known as osteoporosis. Shouldn't you follow your physician's dictate to start taking a widely advertised bone-building prescription medication?

"Not so fast!" stated the U of I scientists in a media statement.

"For many people, prescription bone-building medicines should be a last resort," said Karen Chapman-Novakofski, a U of I professor of nutrition and co-author of a literature review published in a recent issue of the journal *Nutrients*.

The researchers also pointed out that bone density scans are anything but accurate measures of bones. Bone density tests only measure quantity, not quality, of

bone. "Although the test reports that you're fine or doing better, you may still be at risk for a fracture," said Dr. Chapman-Novakofski.

Lead author Karen Plawecki, director of the U of I's dietetics program, and Dr. Chapman-Novakofski investigated the impact of dietary, supplemental, and educational interventions over the last 10 years and reached their conclusions after reviewing 219 articles in scientific journals.

So what should you do to protect and build healthy bones? The study concluded that adults who increase their intake of calcium and vitamin D usually increase bone mineral density and reduce the risk for hip fracture dramatically. While these results can be accomplished through supplements, the researchers also found that food is a good source of these nutrients, Dr. Chapman-Novakofski stated.

The scientists also warned that prescription bone-building medications not only are expensive but they are also loaded with potentially serious side effects including, ironically, an increase in hip fractures and jaw necrosis (dead bone tissue).

"Bisphosphonates, for instance, disrupt normal bone remodeling by shutting down the osteoclasts - the cells that break down old bone to make new bone. When that happens, new bone is built on top of old bone. Yes, your bone density is higher, but the

bone's not always structurally sound," Dr. Chapman-Novakofski said.

The researchers noted that a low-sodium diet seems to have a positive effect on bone density and, in particular, they advised staying away from smoked or processed meats, bacon, lunch meat, processed foods and many cheeses because they all contain a lot of sodium and could sabotage bone health. In addition to making sure you take in extra calcium and vitamin D for bone health, the U of I scientists urge eating a diet rich in fruits and vegetables, too. They stated that consuming adequate protein, less sodium, and more magnesium and potassium is a great way to protect bone health.

Another way to avoid osteoporosis naturally is physical activity, specifically a combination of aerobic, strength, balance, and flexibility exercises. Weight bearing exercises help build strong bones, and fit muscles can keep you flexible and prevent falls as you age, too.



Dr. Karen Chapman-Novakofski is a professor of nutrition at the University of Illinois.

# Editorial: Are You a Ward of the State?

Doctors generally refer to those they treat as “patients.” Even non-mainstream health care practitioners and providers commonly use this term. Insurance companies usually refer to their policy holders as “consumers”, “the insured” or sometimes as “clients.” Most analysts and health care market administrators and watchdogs refer to patients as “consumers” as well.

All of these terms imply different levels of understanding in the relationship between those who use health care services and those who are paid to render them. The more remote from the person seeking care, the more third-person the terms become. A health care practitioner is seeing people face-to-face and so refers to them as “patients” as they are people in need. Insurance companies are a step removed from that and see it purely from an economic standpoint. Administrators and others in the industry who are even further removed from those seeking care see them almost purely as numbers.

So what's the worst thing you can be called as a person who needs medical care? “Ward” is probably the worst term I can think of. Yet in today's society, we imply the use of this term all the time, though we rarely say it. “Ward” is a synonym of the term “guard” or “secure” and the term “ward of the state” usually means someone who is under the protection of (and thus control of) government.

Hence prisoners are “wards of the state” as are some classes of mental patient. As a person looking for medical care, I can think of no worse fate than being a “ward of the state” and thus beholden to their “care.”

Yet most of us are shown that this is the case for us. It's in our common parlance. We talk about “medical licensing” and “FDA approved

medications” and so forth. All implying that without the watchful eye of government, our health care would be nothing more than witch doctor skulduggery.

But look around us. Mainstream medicine is largely made up of questionable solutions to problems that are often merely symptoms of far deeper problems that are usually ignored.

While, for the most part, allopathic medicine is extremely good at treating obvious trauma such as heart attacks, broken bones, and the like, it fails miserably when it comes to more chronic, endemic diseases like cancer, Alzheimer's and even chicken pox.

Often, the solution for the problem is either a dressed up placebo or its potential side effects are so bad that the proposed solution may be worse than the problem itself. More often than not, the “solution” is really just a mask to cover up the real issue.

Henry Thorough talked a lot about striking the root; aiming for the real problem instead of hacking at branches overhead hoping the tree will fall down. In many cases, modern mainstream medicine does just that: it flails at branches instead of striking the root. Worse yet, our society and most of us have been trained to see the only solutions being those that are government-allowed or “verified” treatments. Hence if it's not “FDA approved” it must be nothing more than snake oil.

Personally, I'd much rather prefer to be called a “consumer” of health care or as just another way for health care providers to make a buck. At least in that paradigm, I understand where they're coming from. As a ward of the state, I have only what they offer. An open market of health care options is preferable to a closed market with only one option.

I prefer choice over the false security of being a ward of the state. Don't you?

